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Kaiser Permanente Medical Care Program Oral History Project

David Adelson

HISTORY OF THE KAISER PERMANENTE
MEDICAL CARE PROGRAM

An Interview Conducted by
Ora Huth
1986



DAVID E. ADELSON

July 1984

Since 1954 the Regional Oral History Office has been interviewing leading participants in or well-placed witnesses to major events in the development of Northern California, the West, and the Nation. Oral history is a modern research technique involving an interviewee and an informed interviewer in spontaneous conversation. The taped record is transcribed, lightly edited for continuity and clarity, and reviewed by the interviewee. The resulting manuscript is typed in final form, indexed, bound with photographs and illustrative materials, and placed in The Bancroft Library at the University of California, Berkeley, and other research collections for scholarly use. Because it is primary material, oral history is not intended to present the final, verified, or complete narrative of events. It is a spoken account, offered by the interviewee in response to questioning, and as such it is reflective, partisan, deeply involved, and irreplaceable.

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Interviews

Kaiser Permanente Medical Care Program

David Adelson

Morris Collen, M.D.

Wallace Cook, M.D.

Cecil C. Cutting, M.D.

Alice Friedman, M.D.

Lambreth Hancock

Frank C. Jones

Raymond M. Kay, M.D.

Clifford H. Keene, M.D.

Benjamin Lewis, M.D.

George E. Link

Berniece Oswald

Sam Packer, M.D.

Wilbur L. Reimers, M.D.

Ernest W. Seward, M.D.

Harry Shragg, M.D.

John G. Smillie, M.D.

Eugene E. Trefethen, Jr.

Avram Yedidia

PREFACE

Background of the Oral History Project

The Kaiser Permanente Medical Care Program recently observed its fortieth anniversary. Today, it is the largest, one of the oldest, and certainly the most influential group practice prepayment health plan in the nation. But in 1938, when Henry J. and Edgar F. Kaiser first collaborated with Dr. Sidney Garfield to provide medical care for the construction workers on the Grand Coulee Dam project in eastern Washington, they could scarcely have envisioned that it would attain the size and have the impact on medical care in the United States that it has today.

In an effort to document and preserve the story of Kaiser Permanente's evolution through the recollections of some of its surviving pioneers, men and women who remember vividly the plan's origins and formative years, the Board of Directors of Kaiser Foundation Hospitals sponsored this oral history project.

In combination with already available records, the interviews serve to enrich Kaiser Permanente's history for its physicians, employees, and members, and to offer a major resource for research into the history of health care financing and delivery, and some of the forces behind the rapid and sweeping changes now underway in the health care field.

A Synopsis of Kaiser Permanente History

There have been several milestones in the history of Kaiser Permanente. One could begin in 1933, when young Dr. Sidney Garfield entered fee-for-service practice in the southern California desert and prepared to care for workers building the Metropolitan Water District aqueduct from the Colorado River to Los Angeles. Circumstances soon caused him to develop a prepaid approach to providing quality care in a small, well-designed hospital near the construction site.

The Kaisers learned of Dr. Garfield's experience in health care financing and delivery through A. B. Ordway, Henry Kaiser's first employee. When they undertook the Grand Coulee project, the Kaisers persuaded Dr. Garfield to come in 1938 to eastern Washington State, where they were managing a consortium constructing the Grand Coulee Dam. Dr. Garfield and a handful of young doctors, whom he persuaded to join him, established a prepaid health plan at the damsite, one which later included the wives and children of workers as well as the workers themselves.

During World War II, Dr. Garfield and his associates--some of whom had followed him from the Coulee Dam project--continued the health plan, again

at the request of the Kaisers, who were now building Liberty Ships in Richmond, California, and on an island in the Columbia River between Vancouver, Washington and Portland, Oregon. The Kaisers would also produce steel in Fontana, California. Eventually, in hospitals and field stations in the Richmond/Oakland communities, in the Portland, Oregon/Vancouver, Washington areas, and in Fontana, the prepaid health care program served some 200,000 shipyard and steel plant employees and their dependents.

By the time the shipyards shut down in 1945, the medical program had enough successful experience behind it to motivate Dr. Garfield, the Kaisers, and a small group of physicians to carry the health plan beyond the employees of the Kaiser companies and offer it to the community as a whole. The doctors had concluded that this form of prepaid, integrated health care was the ideal way to practice medicine. Experience had already proven in the organization's own medical offices and hospitals the health plan's value in offering quality health care at a reasonable cost. Many former shipyard employees and their families also wanted to continue receiving the same type of health care they had known during the war.

Also important were the zeal and commitment of Henry J. Kaiser and his industry associates who agreed with the doctors about the program's values and, despite the antagonism of fee-for-service medicine, were eager for the success of the venture. Indeed, they hoped it might ultimately be expanded throughout the nation. In September, 1945, the Henry J. Kaiser Company established the Permanente Health Plan, a nonprofit trust, and the medical care program was on its way.

Between 1945 and the mid-1950s, even as membership expanded in California, Oregon, and Washington, serious tensions developed between the doctors and the Kaiser-industry dominated management of the hospitals and health plan. These tensions threatened to tear the Program apart. Reduced to the simplest form, the basic question was, who would control the health plan--management or the doctors? Each had a crucial role in the organization. The symbiotic relationship had to be understood and mutually accepted.

From roughly 1955 to 1958, a small group of men representing management and the doctors, after many committee meetings and much heated debate, agreed upon a medical program reorganization, including a management-medical group contract, probably then unique in the history of medicine. Accord was reached because the participants, despite strong disagreements, were dedicated to the concept of prepaid group medical practice on a self-sustained, nonprofit basis.

After several more years of testing on both sides, a strong partnership emerged among the health plan, hospitals, and physician organizations. Resting on mutual trust and a sound fiscal formula, the Program has attained a strong national identity.

The Oral History Project

In August 1983, the office of Donald Duffy, Vice President, Public and Community Relations for Kaiser Foundation Health Plan and Hospitals, contacted Willa Baum, director of the Regional Oral History Office, about a possible oral history project with twenty to twenty-four pioneers of the Program. A year later the project was underway, funded by Kaiser Foundation Hospitals' Board of Directors.

A project advisory committee, comprised of seven persons with an interest in and knowledge of the organization's history, selected the interviewees and assisted the oral history project as needed. Donald Duffy assumed overall direction and Darlene Basmajian, his assistant, served as liaison with the Regional Oral History Office. Committee members are John Capener, Dr. Cecil Cutting, Donald Duffy, Robert J. Erickson, Scott Fleming, Dr. Paul Lairson, and Walter Palmer.

By year's end, ten pioneers had been selected and had agreed to participate in the project. They are Drs. Cecil Cutting, Sidney Garfield, Raymond Kay, Clifford Keene, Ernest Seward, and John Smillie, and Messrs. Frank Jones, George Link, Eugene Trefethen, Jr., and Avram Yedidia.

By mid-1985 an additional ten had agreed to participate. They are: Drs. Morris Collen, Wallace Cook, Alice Friedman, Benjamin Lewis, Sam Packer, Bill Reimers, Harry Shragg, and David Adelson, Lambreth (Handy) Hancock, and Berniece Oswald.

Plans to interview Dr. Garfield and Dr. Wallace Neighbor, who had been at Grand Coulee with Dr. Garfield, were sadly disrupted by their deaths a week apart in late 1984. Fortunately, both men had been previously interviewed. Their tapes and transcripts are on file in the Central Office of the medical care program. Similarly the project lost Karl Steil due to his lengthy illness and death in 1986.

The advisory committee suggested 1970 as the approximate cutoff date for research and documentation, since by that time the pioneering aspects of the organization had been completed. The Program was then expanding into other regions, and was encountering a new set of challenges such as Medicare and competition from other health maintenance organizations.

Research

Kaiser Permanente staff and the interviewees themselves provided excellent biographical sources on each interviewee as well as published and unpublished material on the history of the Program. The collected papers of Henry J. Kaiser on deposit in The Bancroft Library were also consulted. The oral history project staff collected other Kaiser Permanente publications, and started a file of newspaper articles on current health care topics. Most of this material will be deposited in The Bancroft Library with the oral history volumes. A bibliography is located at the end of the volume.

To gain additional background material for the interviews, the staff talked to five Kaiser Permanente physicians in northern California, two of whom had left the program years ago: Drs. Martin Abel, Richard Geist*, Ephraim Kahn*, James Smith*, and William Bleiberg*. James De Long* in Portland, and William Green*, William Allen*, and Dr. Toby Cole* in Denver talked about the history of their regions. In addition, Peter Morstadt*, formerly executive director of the Denver Medical Society discussed the attitude of the Medical Society toward Kaiser Permanente's years in Denver.

The staff also sought advice from the academic community. James Leiby, a professor in the Department of Social Welfare at UC Berkeley and an advocate of the oral history process, suggested lines of questioning related to his special interest in the administration of and relationships within public and private social agencies. Dr. Philip R. Lee, professor of social medicine and director of the Institute for Health Policy Studies at the University of California Medical School, proposed questions concerning the impact of health maintenance organizations on medical practice in the United States.

Organization of the Project

The Kaiser Permanente Oral History Project staff, comprised of Malca Chall, Sally Hughes, and Ora Huth, met frequently throughout 1985 to assign the interviews, plan the procedures and the time frame for research, interviewing, and editing, and to set up a master index. Interviews with the first nine pioneers took place between February and June, 1985, and with the second group between February and December, 1986. The transcripts of the tapes were edited, reviewed by the interviewees, typed, proofread, indexed, copied, and bound. The entire series will be completed during 1987.

Summary

This oral history project traces, from various individual perspectives, the evolution of the Kaiser Permanente Medical Care Program from 1938 to 1970. Each interview begins with a discussion of the individual's family background and education--those tangible and intangible forces that shaped his or her life. The conversation then shifts to the interviewee's participation in and observation of significant events in the development of the health plan. Thus, the reader is treated not only to facts on the history of the Program, but to opinions about the personal qualities of the men and women--doctors, other health care professionals, lawyers, accountants, and

*Tapes of these interviews have been deposited in the Microforms Division of The Bancroft Library.

businessmen--who, often against great odds, dedicated themselves to the development of a health care system which, without their commitment and skills, might not have resulted in the individual and organizational achievements that the Kaiser Permanente Medical Care Program represents today.

The Regional Oral History Office was established to tape record autobiographical interviews with persons who have contributed significantly to the development of the West. The office is headed by Willa K. Baum and is under the administrative supervision of James D. Hart, the director of The Bancroft Library.

Malca Chall, Director
Kaiser Permanente Medical Care Program
Oral History Project

23 January 1987
Regional Oral History Office
Berkeley, California

INTERVIEW HISTORY

David Adelson, a highly principled and esteemed Emeryville attorney, was invited to be a Kaiser Permanente Medical Care Program memoirist because he and his family have made significant use of the program's health plan since it was opened to the public in June 1945. Earlier, in 1942, when his wife, Valerie Jean Adelson, was employed at the Richmond Kaiser Shipyards, the Adelsons were members of the health plan operated for Kaiser by Sidney Garfield and Associates, which was open only to company employees and their families. They left the plan briefly when World War II ended and the shipyards closed down, but they came back two months later and have maintained their membership since then. During these years, major health problems offered David Adelson and his daughter, Naomi (deceased in 1970), an extended opportunity to observe at first hand the quality of Kaiser Permanente care and facilities.

Mr. Adelson completed grammar and high school in Tampa, Florida. He entered the University of Florida at Gainesville in 1928, worked summers, and earned several fellowships to finance his studies in chemistry and physics. By 1935 he had a Ph.D. From 1935-1937 two more fellowships carried him through advanced organic chemistry studies at Columbia University. While there, in 1937, he was interviewed and hired for a chemical research job at the Shell Development Company in Emeryville. He moved to Berkeley where he met University of California psychology student, Valerie Jean Kestenbaum, whom he married in 1939. In the next decade two daughters were born: Naomi, in 1945, and Janeth, in 1947.

David Adelson became particularly interested in Kaiser Permanente health care and services when he was president of the local branch of the Federation of Architects, Engineers, Chemists, and Technicians, the non-professional chemical workers' union. He and other union leaders met with Kaiser health plan representative, Avram Yedidia, who became a lifelong friend. Through Mr. Yedidia they consulted with several of the pioneer northern California Permanente Medical Group doctors and, in June, 1945, decided to enroll the union in the plan. Along with many Shell employees the Adelsons signed up for family coverage although, at that time, the Shell Development Company had decided to stay with their fee-for-service plan.

In 1946, David Adelson, observing the legal problems of friends and Shell Development associates, decided they needed good but difficult to find legal representation. So, while working full time, he attended night classes at Golden Gate University Law School. By October 1950 he had earned the law degree and passed the bar. By February 1951 he had left Shell Development and established a general and family law practice.

Preceded by a planning conference on March 5, 1986, two interview sessions averaging two hours each were recorded in the living room of Mr. Adelson's Kensington home on March 19 and 26, 1986. An outline, provided in advance, indicated the topics to be discussed during each session. Mr. Adelson received his lightly edited transcript in December 1986, and returned it soon thereafter with few revisions.

As a result of his experiences as a patient during a severe illness, Mr. Adelson has high praise for the Kaiser Permanente doctors and support staff and the quality of care provided. As to his philosophy on health care, he commented:

I have always felt. . .that humans are so different in their makeup, that in spite of all the technical advantages medicine is still somewhat of an art--not completely a science. The art of handling people and their problems is a very important ingredient . . .in health care delivery.

As for the health plan's future he added:

I think the Kaiser system, their whole philosophy, is a sound one, and it has withstood the test of time, and all the stresses that have been experienced by hospitals, and the medical profession in general. I think it's here to stay. I think this is the system of the future as well as of the present.

Ora Huth
Interviewer-Editor

24 August 1987
Regional Oral History Office
486 The Bancroft Library
University of California at Berkeley

BIOGRAPHICAL INFORMATION

(Please print or write clearly)

Your full name DAVID E. ADELSON

Date of birth MARCH 21, 1912 Place of birth CHICAGO, ILLINOIS

Father's full name EDWARD ADELSON

Birthplace MARIAMPOL, LITHUANIA

Occupation FOREMAN IN FACTORY MANUFACTURING MEN'S SUITS

Mother's full name ESTHER ADELSON

Birthplace SMALL TOWN IN EASTERN POLAND

Occupation HOMEMAKER

Where did you grow up ? TAMPA, FLORIDA

Present community HAVE RESIDED IN KENSINGTON, CA., APPROX. 40 YEARS

Education B.S., M.S., PH.D., UNIVERSITY OF FLORIDA, GAINESVILLE, FL.
J.D., GOLDEN GATE UNIVERSITY LAW SCHOOL, SAN FRANCISCO, CALIF.

Occupation(s) RESEARCH CHEMIST IN UNIVERSITY LABORATORIES,
(UNIVERSITY OF FLORIDA AND COLUMBIA UNIVERSITY IN THE CITY OF NEW YORK)
PRIVATE PRACTICE OF LAW, BEGINNING IN 1951 AND CONTINUING AT
PRESENT

Special interests or activities _____

PEOPLE

I FAMILY BACKGROUND, EDUCATION, AND EARLY WORK

[Interview 1: March 19, 1986]##

Huth: Mr. Adelson, we're ready to begin our first interview at your home in Kensington. Will you please tell me when and where were you born?

Adelson: I was born on March 21, 1912, in Chicago, Illinois.

Huth: That's only two days from now, so we are getting close to your birthday.

Adelson: I'm very much aware of that.

Huth: Can you tell me where you lived in Chicago? Was it in one of the suburbs, or was it in the city of Chicago itself?

Adelson: No, it was in the city of Chicago, in what is called the West Side, which has changed very appreciably since those early days when I lived there. The ethnic character of the neighborhood, and the entire area, is very drastically different now from what it was in the years that I lived there. I lived in Chicago from 1912 to May, 1919.

Huth: That's a period of seven years.

Adelson: Yes, seven years.

The Eastern European Connection

Huth: Can you tell me something about your parents? What were your parents doing at that time? What were their occupations, and where did they come from?

##This symbol indicates that a tape or a segment of a tape has begun or ended. For a guide to the tapes see page 62.

Adelson: My father's first name was Edward, and he was born in Lithuania. He left Lithuania when he was approximately sixteen years old, and came on his own to America. During the period from 1912 to 1919 he was working at Sears, Roebuck and Company, which had a very large mail-order establishment on the West Side of Chicago, a mile or two from where we lived.

At the time we left Chicago in May, 1919, he was a foreman in the men's clothing manufacturing department. In those days men bought suits and trousers and other wearing apparel by mail-order from a catalog, and these garments were made by Sears at this particular location on the West Side of Chicago.

Huth: What did he do? Was he a foreman for a particular part of the process?

Adelson: Well, initially he was a men's garment maker. He would cut cloth for manufacturing the trousers, coats, and jackets. And over the years he became a foreman. During World War I he was exempt from military service because he had a wife and two children. And during World War I he was a victim of the nation-wide influenza epidemic, which proved to be very disastrous to his health, and so we moved to Florida in May, 1919. He was advised to go to a part of the country with a milder climate than one encounters in the city of Chicago.

My mother was born in Eastern Poland, and brought to the United States by her parents as a very small child. She was one of five children. She was raised in the city of Chicago, and was a housewife--she did not work outside the home.

Huth: How did your parents meet?

Adelson: I don't know, except I do know they were married on the Fourth of July--that was the day set for the wedding--because that was the only day my father could get off work.

Huth: Because it was a national holiday.

Adelson: Yes, because it was a national holiday. [laughs]

Huth: How long did they live? Are they still alive?

Adelson: No. My father expired in October, 1921, as a result of this shattering of his health by the influenza epidemic. My mother died in Berkeley, California--she was living with us at the time--in March, 1957. My father was thirty-eight years old at the time of his death. My mother was sixty-five years old at the time of her death.

Huth: Do you remember your grandparents at all?

Adelson: I remember only my mother's parents because they lived in the city of Chicago. My father's parents did not come to America.

Huth: Did he correspond with them?

Adelson: Oh, yes.

Huth: What did they do in Lithuania?

Adelson: Well, my paternal grandfather was a grain broker. He was a broker for grain that was grown by Lithuanian farmers and then sold generally.

Huth: Can you tell me the particular part of Lithuania where he lived?

Adelson: Well, yes, this was in a city called Mariampol, which was near the border with what was then known as East Prussia.

Huth: Do you know what part of Poland your mother was from?

Adelson: The eastern part. I won't say where because I'm not sure of the spelling of the name of the town. It was also a very small town. I might say that my father left Lithuania because he did not wish to be conscripted into the Russian Czar's army. He left with his family's blessing, and simply walked across the border into East Prussia. He kept going until he came to the port of Koenigsberg, as it was called then.

Huth: Does that mean "king"--"koenig?"

Adelson: "King's mountain," is the literal translation. He then went into the steerage of a ship and came over to America. He entered America through Ellis Island.

Huth: Do you know what year he came to this country?

Adelson: Well, this would have been about 1898 or 1899.

Huth: That gets us into the United States. Did he go directly to Chicago?

Adelson: No, he initially worked and lived in New York City. That is how he got into the garment industry as a worker.

Huth: Did he have some training before he got that job?

Adelson: No, he simply went in as an apprentice, and was trained on the job.

Huth: Were there any unions in those days?

Adelson: I don't remember any talk about unions.

Huth: Do you know when he left New York City? And, was there anything else notable about the New York experience?

Adelson: Well, my father was an extrovert-ish person, and made friends very easily--got along very well with people--and befriended people. They in turn helped him. And after a few years of living in New York he apparently decided that his fortunes would be improved if he went westward. In those days, New York City, Chicago, and the Midwest were known as the West with a capital "W". That is true. I am aware of this because I worked in New York in the middle '30s, and they still referred to Chicago as the "West." California was always referred to as the "Coast" with a capital "C".

Huth: Were you an only child?

Adelson: No, I had an older sister. And my older sister was born in Chicago. She was twenty-two months older than I.

Huth: And what was her name?

Adelson: Florence Lillian.

Huth: We didn't get your mother's maiden name. Do you remember what her maiden name was?

Adelson: Yes, it was Hadesman.

Huth: And what was her first name?

Adelson: Esther.

Huth: How about your mother and father and their brothers and sisters? Did they come from a small or a large family? Were there other children?

Adelson: Yes, my father was one of ten children, all told. They all had the same father.

Huth: Did they have the same mother?

Adelson: No. The mother of the oldest five--and my father was in that group--expired sometime after the fifth child was born. My grandfather remarried, and in the tradition of his religious faith--the Jewish faith--he married a younger sister of his deceased wife. And they had five more children.

Huth: Can you tell me something more about that custom? I haven't heard about that.

Adelson: Well, it's not rigid--as far as I know--

Huth: But if the younger sister was unmarried--

Adelson: --and available, that was very often done. At least it was done then. Everything today of course is quite different. Anyway, just to conclude with that, all five of the first group of children came to America, one by one.

Huth: What about the second group?

Adelson: The second group did not come to America.

Huth: Can you account for that?

Adelson: Well, they just didn't come. They were younger, and they continued to live there.

Huth: And they weren't facing going into the Czar's army, perhaps.

Adelson: Well, not for a time, that's right. Then, at the end of World War I, Lithuania became an independent state--one of the Baltic states, as we refer to them--and remained as such independent until the summer of 1940 when the Soviet Union annexed Lithuania, Latvia, and Estonia--the three Baltic states.

I hope we're not getting too far afield.

Huth: No, we aren't. That's fine. Now, these were all brothers, is that right?

Adelson: In the first five there was one sister and four brothers. I don't know the composition of the second group of five. But they were in touch with each other through the years, and as I say, the annexation took place in 1940. At that point my father's family that was still in Lithuania disappeared. We were never able to locate them. We're reasonably sure that they expired.

Huth: The whole family?

Adelson: The whole family, or what was left of them in 1940, expired in the few years thereafter. My father's younger brother was in touch with them after my father died, and he was in touch with them through the years up to 1940. He lost touch with them at that point.

At the end of World War II he made very extensive efforts to locate them, and he enlisted the help of the then Senator Claude Pepper, who is now a representative in Congress from Florida. He

Adelson: tried to get help from the United States Embassy in the Soviet Union, and then he made contacts in his little town where he was born--namely, in Mariampol.

Huth: But he never came up with anything?

Adelson: Well, he wrote a letter or two to a non-Jewish man whom he remembered from his boyhood, and who had worked for his family. He wrote this letter in Russian, which he could still write. He sent the man some money, and he asked him what happened to the family. The man did not reply directly--and I suspect it was because he was illiterate--but he had someone else reply for him. This person quoted this man to the effect that, when the Russians came in in 1940, the family "moved away." So they were shipped away, and what happened to them we never did find out. If this version is true, they were lost before the Germans came in. You know the Germans took over that whole area during World War II.

So that's the early history as reported to me.

Huth: That's very interesting. Did the aunt or any of these uncles have any impact on your life in any way? Were they fairly close to you?

Adelson: Well, we were always a close family.

Huth: Did they also settle close to Chicago?

Adelson: Well, my father's oldest brother settled in and remained in New York City--he lived on Long Island. A sister married and is currently living in Florida. And two other brothers also lived in Florida. We were in close contact through the years.

Huth: What kinds of occupations did they go into?

Adelson: The brother in New York was a manufacturer of wooden boxes, and his business was sort of wiped-out by the appearance of the corrugated box container. He was stubborn, and lacked the foresight or ability to convert, so his business just ground to a halt, and he died a year or so later.

One brother worked in the retail mercantile industry in stores in Florida. The youngest brother, the one who had tried to locate the family, worked as a real estate salesman, and was in that sort of thing in Florida. He went through the Florida boom and bust in real estate in the '20s.

Huth: Was the "bust" around 1929--along with the stock market crash?

Adelson: No, it was in '26. So by the time the rest of the country "crashed" in 1929, people living in Florida had been dragging the bottom so long that there was nothing new about it.

Huth: Same old thing.

Adelson: Right. Now, on my mother's side--she had two sisters. The oldest sister died of peritonitis from a burst appendix when she was twenty years old. As reported to me, when she had these severe pains in the abdominal area she was advised to put a hot water bottle there, and that's about the worst thing you can do. The appendix burst, peritonitis set in, and there were no antibiotics. This was very early in the twentieth century. The second sister lived through the years, was in business with her husband, and remained in Illinois and was very close to my mother.

Of the two brothers, one of them was an accountant, and the other one started out in the garment trades as a garment worker, and then he went into business for himself--one business after another. That was it. They all remained in the Chicago area.

Huth: Were there any cousins that were especially influential in your life, or that you had close contact with?

Adelson: No. I have a younger brother, Bernard, who was born after we moved to Florida, and he is now a physician practicing medicine in Winnetka and Evanston, Illinois--north of the City of Chicago. He's an internist.

My sister died in 1953.

Huth: Was that Florence?

Adelson: Yes. My brother and I have been close all through the years and in touch with each other.

Huth: Was he in a group practice or in anything like it?

Adelson: He's in private practice.

Huth: But perhaps with a group of doctors?

Adelson: Well, there are some doctors with him. They're all internists, however. He's the senior person in the group. He's also connected with the Northwestern University Medical School as a clinical professor of some sort. I don't know his exact rank. And he is active in connection with the Evanston Hospital--that's the name of it.

Huth: So he stayed there?

Adelson: Well, he grew up in Florida, and then he went to medical school at Northwestern, and he did part of his post-medical school training in the Chicago area, so it was logical for him to remain there.

Education, Honors, and Chemistry Specialty

Huth: Perhaps now we should go into your education. What can you tell me about that? Shall we talk about grammar school first?

Adelson: Yes. I went to grammar school for three years in the City of Chicago, to a school near our home. Then, when we moved to Florida in May, 1919, I went on to grammar school in Florida, then to junior high school, to senior high school, and I graduated and went from there to the University of Florida.

I entered the University of Florida in 1928, and graduated with a B.S. [bachelor of science] degree in 1932. My major was chemistry. In August of 1933 I was at the University of Florida, and I was awarded a Master of Science [M.S.] degree in chemistry. In August of 1935 I was still at the University of Florida, and I was awarded a Doctor of Philosophy [Ph.D.] degree, with a major in chemistry and a minor in physics.

During one of those years I was an instructor in chemistry, and during another one of those years I had a fellowship. I was a Sparks Memorial Fellow of the honor society--Phi Kappa Phi.

Huth: Is that a chemistry honor society?

Adelson: No, that is an honorary scholastic society which is similar to, but not as prestigious as Phi Beta Kappa. In those years we did not have Phi Beta Kappa at the University of Florida.

In September, 1935, I went to Columbia University at Morningside Heights.

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Huth: That's the location?

Adelson: Yes, that's essentially at 116th Street and Broadway in New York City--that's the main campus. There I had a post-doctoral fellowship, the Fritzsche Memorial Fellowship in organic chemistry. I had that for one year.

Then, for the academic year 1936-1937, I was a National Research Council Fellow in chemistry at Columbia University.

In October, 1937, I began my work as a research chemist for the Shell Development Company in Emeryville, California.

Huth: Then perhaps we should stop there and go back to talk about your marriage.

Adelson: No, I was still single. In those days one did not marry, as a rule, in college. As a matter of fact, when I was an undergraduate in Florida, the school at that time was not co-educational. It was just for men. The women went to a school in Tallahassee. That was the Florida State College for Women, now known as the Florida State University. Now both locations are co-educational, but in those years, if a University of Florida undergraduate student at Gainesville, Florida, married—he was rolled out of school. If he was a graduate student, he could marry only with the consent of the dean of the graduate school.

If we look back now, all that was pretty ridiculous, but those were the rules then. The economics of the times also supported this sort of thing. It was very difficult to support oneself, much less a family.

Huth: Were your parents able to pay for your college education, or did you have to work while you were in college?

Adelson: I worked. There was no tuition at the University of Florida, and the incidental fees per semester were comparable to what they were in the '30s here at the University of California. About \$25 to \$30 a semester. That even included a season ticket to the football games. Again, the times have changed. [laughs]

Huth: When you were in grammar school, high school, and college, did you have any special hobbies--things that you liked to do? Were you ever interested in sports?

Adelson: Not really. Only in terms of just general fitness. I had no particular hobbies, never played golf--still don't.

Huth: And nothing like stamp-collecting, or any of the things that kids did in those days?

Adelson: No.

Huth: Did you work while you were in high school? And if so what kinds of jobs did you do?

Adelson: Well, part-time. When I was in junior high school, I worked after school for about two hours an afternoon assisting a milkman who delivered milk. Milk was delivered in those days twice a day--in the morning and in the late afternoon--refrigeration being rather rudimentary. We had ice-boxes. So I would ride on the truck with this man and jump out with the bottles--these were all glass bottles of milk--go directly into the kitchens of these homes and put the milk in the ice-box, and carry out the empty bottles. And he just drove this Model T Ford truck.

Huth: In those days people left their houses open, so you just walked in?

Adelson: When we lived in Florida, the whole time we had no locks whatsoever on our doors, and I never owned a key to anything until I got a key to a chemistry locker as a freshman at the University of Florida.

Huth: That's an interesting sidelight on the times.

Adelson: The other thing I did while I was in high school--during the summers I worked in the baseball park in my home city of Tampa. I worked in the stand where we sold soft drinks, and hot dogs, and other sandwiches.

Huth: So your family lived in Tampa? I guess we forgot to mention that earlier when you told me your family moved to Florida.

Adelson: Yes. And the country was dry in those days--Prohibition was on--so there was no sale of beer, or anything like that, as we now have at the ball park. Then later, when I was in high school and in the initial years when I was in college, I worked summers for an aunt and uncle who had a tire store in Waukegan, Illinois. I was able to save up enough money to finance the next year's education.

I might just add, for whatever interest it is, that through most of my college years my budget was approximately \$35 per month. I ate in a boarding house, and that cost \$20 a month. My room rent was \$7 a month. And the rest of the money was for books and papers. Transportation was always by means of hitchhiking.

II RESEARCH CHEMIST AT SHELL DEVELOPMENT IN EMERYVILLE, 1937-1950

Adelson: We're now in California.

Huth: Yes, California. So you were working then at Shell Development [in Emeryville]. When would that have been?

Adelson: October, 1937.

Huth: Was that when you moved to California?

Adelson: Yes.

Huth: What part of California?

Adelson: Well, I lived in Berkeley. I lived very close to the campus.

Huth: Were you attending the university?

Adelson: No. I didn't have any connections, I didn't know anybody. I was hired by Shell Development Company while I was still in New York City--at Columbia University.

Huth: How did they hire you?

Adelson: Well, I had written letters to various companies, seeking jobs. Jobs were difficult to come by then; they were in very short supply. The country was still recovering from the Great Depression. One of the companies, a smaller company in the East, took the liberty as they wrote to me of forwarding the letter and my curriculum vitae to the Shell Development Company, with whom they had done contract work and other business in California. I got a letter from Shell.

Huth: That was in Emeryville?

Adelson: Yes, that was in Emeryville. I filled out an application blank. Then they asked me to come to be interviewed by one of the Shell Oil executives whose offices were at Rockefeller Center in New York City. A short time after that interview I was offered this job.

Huth: What job were you offered?

Adelson: I was a research chemist.

Huth: Was that your title?

Adelson: Yes.

Huth: "Research Chemist I," or "II," or just "Research Chemist?"

Adelson: No, no, just "Research Chemist."

Huth: Were there a number of other research chemists that you worked with?

Adelson: Oh, yes.

Huth: Were they all research chemists?

Adelson: No, there were physicists there, and there were some mathematicians. As far as the professional people were concerned—many of them had Ph.D. degrees. Many had only master's or bachelor's degrees. Then there were the supporting staff of laboratory assistants, laboratory helpers, and that's what really constituted the research arm. Shell Development Company was the American research arm of the American Shell Oil Company, which in turn was owned by the Royal Dutch Shell Company, which is a multi-national company that extends all over the world. Royal Dutch Shell Company was the popular name. Actually there was another name—a Dutch name.

Huth: But it was known as the Royal Dutch Shell Company?

Adelson: That's how it was known here. I can give you that other name, but it's a jawbreaker: N. V. De Bataafsche Petroleum Maatschappij.

Huth: All right [laughs]. I think future researchers reading your oral history might want to know that.

When was this company founded—Shell Development?

Adelson: This company was started in 1928.

Huth: Did it begin in Emeryville?

Adelson: Yes, in Emeryville, and it remained there.

Huth: No branches in the rest of the country?

Adelson: Well, in later years it had a satellite laboratory in Modesto, California. And of course it was intimately connected with the Shell refineries in Martinez, California; Wilmington, California; Wood River, Illinois; and Houston, Texas.

Many of the chemists and physicists who were at Shell Development in Emeryville were trained and educated in Europe and were citizens of Great Britain, Germany, Switzerland--possibly one or two other foreign countries. Many of these people had worked in Royal Dutch Shell installations elsewhere in the world. For example, in Indonesia; and in Amsterdam, Holland and so on.

Huth: So it was an international group that you were working with?

Adelson: Yes, and they were quite cosmopolitan in the scientific sense of the word.

Huth: Do you think it was located in Emeryville because it was close to the University of California, or the Bay Area--would that have had anything to do with locating it there? Do you have an opinion about that?

Adelson: Well, I think the University of California probably was a plus, in other words, being close to the university. But I think the main reason it was located here was that they wanted it to be close to the Martinez, California refinery of Shell Oil, and at that time there was a Shell Oil subsidiary known as Shell Chemical Company, which was located at Pittsburg, California.

Huth: What was the difference between Shell Chemical, Pittsburg, and Shell Development?

Adelson: Well, Shell Chemical was a manufacturing company, and they manufactured many chemicals from petroleum, the processes for which originated from the research at Shell Development in Emeryville. There was an intimate connection with the Shell Oil Refinery in Martinez and in Wilmington, California, because both refineries had control laboratories. So there was an interchange of information, and an interchange of personnel from time to time.

Huth: What are control laboratories?

Adelson: They are there to monitor and control the operations of the refinery. The refinery produces various grades of lubricating oil and heating oil and various grades of gasoline and aircraft fuel. The control laboratory was a laboratory that monitored the quality of these products.

Huth: So was it a form of research?

Adelson: Well, I don't know. It was mainly control work--to be sure, for example, that the gasoline that was being produced had the proper octane rating, that the lubricating oils that were being produced had the proper degree of viscosity and other physical characteristics important in their subsequent usage.

So I think the proximity to these other Shell Oil units and the University of California, and also the good climate of the Bay Area--these were all reasons for locating Shell Oil in Emeryville. The company, I believe, also felt they could attract scientists from other parts of the country and other parts of the world--graduates of universities--more readily to a research organization that was in a metropolitan area where there were cultural outlets and the like, more readily than if they were located, let us say, in the Mojave Desert or some other remote area.

Huth: We're up to your coming to this area. Did you live in Emeryville?

Adelson: No, I was unmarried at the time, and having lived on or near college campuses during the preceding nine years of my life, I got living quarters as close to the University of California as possible. I felt that I would feel more at home there.

Huth: Among the young people there?

Adelson: Yes, I was young--I was twenty-five years old at the time, and I also felt that I would be more comfortable close to a university than just living in an unknown neighborhood. So in the early days I attended all kinds of functions at the university. In other words, the university, at that point in my life, was regarded as a sanctuary where one could be comfortable if he lived near it and so on. So I settled in Berkeley.

Huth: That's 1937. How long was it from then until you met your wife?

Marriage to Valerie Jean Kestenbaum, 1939

Adelson: I met my wife, I think, four months after I arrived in California. I met her in January, 1938. She was a senior at the University of California majoring in psychology, and we started going together.

Huth: Did you meet her through attending these University functions?

Adelson: Well, no. At the time I met her I was sharing an apartment with two other young bachelors, both of whom worked at Shell Development Company as chemists. So we were three chemists living in an apartment near the University of California campus on

Adelson: Le Conte Avenue. One of these chemists--in fact both of them--were University of California graduates, and one of them had known my wife on the campus. He was the one who introduced us.

Huth: Can you tell me what her maiden name was?

Adelson: Yes, her name was Valerie Jean Kestenbaum. That is a name of Germanic origin, which translated means "chestnut tree."

Adelson: The courtship proceeded with dispatch and intensity, and we were married on March the seventh, 1939, in San Francisco, California.

Huth: A little over a year after you met. After that where did you live?

Adelson: Well, we lived then in a small house in a court of houses on Arch Street, a half block north of the Hearst Avenue border of the campus. We lived in that house until December of 1947. This was from March, 1939, to December, 1947.

Huth: That was quite a long time to live in one place in those days, wasn't it--around a campus at least?

Adelson: Yes. Well, I don't think people moved quite as often as they do now. Then, in December, 1947, we moved to our present home here in Kensington, and we've resided here continuously since then.

Huth: That's not very much moving around, and that's very interesting. Could we talk a little bit about your wife and her family now?

Adelson: Well, her parents were divorced, and she was an only child. She had an older brother who died in early childhood. She graduated from the University of California with a major in psychology, and with an A.B. [bachelor of arts] degree.

Huth: What year did she graduate?

Adelson: Well, she actually finished her course work in December of 1938. In those days, when the university was on a semester basis, the semesters ran from August to December, and then from January through May. But there was only one graduation per year at the time, so she actually graduated in June, 1939.

Huth: After she had married you.

Adelson: Yes, we were married at the time.

Huth: Did she go on to school after that?

Adelson: No, after she finished her work for her degree in December, 1938, very shortly thereafter she got a job working as a case worker for the State Relief Administration, which was known as the SRA. She

Adelson: worked in Merced, California. The State Relief Administration was an agency that dispensed monetary relief and assistance--you might today call it "welfare"--principally to migratory workers, at least in her location.

This is now done through the counties. The SRA was disbanded, either during the war or right after World War II. So she worked in this capacity.

Huth: Did she live down there?

Adelson: Yes, she lived down there, and I would go down on weekends. Then she left that job in March, 1939, when we got married, and we set up housekeeping and lived in Berkeley.

Huth: She didn't work then?

Adelson: No.

Huth: And was her next job the job at Kaiser?

Adelson: Yes, and that was during World War II. That would have been '42 or '43.

Huth: So she didn't work between 1939 and 1942?

Adelson: No. And when she went to work, it was in the Richmond shipyard area, and the Kaiser offices in Richmond.

Huth: Was she working for Kaiser at the time? Was she an employee of Kaiser?

Adelson: Yes, during that period. First in the housing office, where they attempted to locate--and did locate--housing for workers and their families, workers that Kaiser was hiring from various parts of the country to work in the Kaiser shipyards in Richmond. After working for a time in the housing department, she was transferred to a program conducted by Kaiser for--and I think funded some way by--the War Manpower Commission. The purpose of this manpower study was to get as many handicapped people, or people who had some form of retardation or physical difficulty, into useful wartime jobs. There was a labor shortage, as you know, during World War II.

So she would go around the shipyards where the various jobs were being carried out, and observe the people at work, and write up accounts of the motions and skills that were needed to perform these jobs.

Huth: How did she get that job? Did she go job hunting?

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Adelson: There was a shortage of trained personnel--brought on by the war. She went out, interviewed with Kaiser, and was hired. At that time, Kaiser had a health plan that Kaiser employees were eligible to join--that they were covered by--and this was the plan that Dr. Sidney Garfield had initially developed for Kaiser at some location other than the Bay Area. All of the activities of the health plan were at what is now the Richmond Kaiser hospital location on Cutting Boulevard.

Huth: Can you tell me something about your wife's background before we go any further into the health plan. Where had she lived before she came here?

Adelson: She graduated from high school in San Francisco. Her mother had lived there. Her father lived in Los Angeles, and her father was a general practitioner--he was a physician in private practice.

Huth: Do you know where he went to school?

Adelson: Yes, he went to medical school in Denver, Colorado. I think the medical school is now part of the University of Colorado. It was called--I think--Gross Medical School in those days.

Huth: Where was she born?

Adelson: In Denver.

Huth: Were her mother and father divorced after the move to California?

Adelson: No, they were divorced in Denver--

Huth: When she was small?

Adelson: When she was very young, yes. Her father moved to Los Angeles, and her mother moved to San Francisco. They both started over, as it were.

Huth: Did her mother work?

Adelson: Yes, in San Francisco. She sold Realsilk products.

Huth: I remember Realsilk. That was door-to-door sales, wasn't it?

Adelson: Yes, door-to-door sales. She built up quite a clientele. That was competitive with another organization that also sold door-to-door. I don't remember what their name was, but, anyway, that's what she did.

Huth: Did your wife go to school in San Francisco?

Adelson: Yes, she graduated from Polytechnic High School, which is no longer in existence. That was out near Kezar Stadium.

Huth: And then did she go directly to UC Berkeley from high school?

Adelson: Yes. In her first year she continued to live with her mother in San Francisco, and she commuted daily to the University of California--by trolley to the Ferry Building, by ferry across the Bay, and by the Southern Pacific red trains that went up to within a block of the Berkeley campus. Back and forth.

Huth: Was that connected with the old Key System?

Adelson: No, that was the Southern Pacific--

Huth: That was before the Key System?

Adelson: Well, they were both in existence then. The Key System was also there.

Huth: The bridge across the Bay wasn't constructed until '36, was it?

Adelson: Nineteen thirty-six, and opened in the spring or summer of '37.

Huth: And then did she move over to Berkeley?

Adelson: After the first year she got acquainted with various girls, and she moved to Berkeley, and they shared an apartment.

Huth: Did her father support her education, or did she have to work to support herself?

Adelson: Well, she was helped by him. She had to watch her nickels and dimes, as they say. It was a very tight situation.

Huth: It probably was cheaper in those days to get together with someone in an apartment than it was to live in a boarding house.

Adelson: Yes, and in those days there were also no dormitories. In fact, when I came to California in 1937, the only dormitory I recall at the University of California was the one that is near the Greek Theatre, between the Greek Theatre and the stadium.

Huth: There was the big men's hall up there, Bowles Hall. The women's hall [Stern Hall] probably wasn't there then.

Adelson: No, it wasn't there. The men's hall was there. The women's hall came much, much later. People either lived in rooms and ate in boarding houses, or they got together and shared apartments, which is what she did.

Adelson: So we got acquainted with the forerunner of what is now the Kaiser Foundation Health Plan due to her employment during World War II at the Kaiser installations in Richmond. Then, when she left Kaiser we had our first child, and this child was born in the spring—April, 1945, at Alta Bates Hospital.

Huth: So you weren't members of Kaiser then?

Adelson: No, Kaiser was not available.

Huth: Once you left their employment, you weren't covered anymore?

Adelson: You weren't covered anymore, and in fact Kaiser, I believe, was winding down very rapidly--

Huth: Why did she leave? Did she leave because it was winding down?

Adelson: No, she left so we could have a family.

Huth: There was probably no such thing as maternity leave in those days.

Adelson: No. Also, one didn't think in those terms either in those days.

Huth: Yes, that's right. You stayed home with your children.

Before this time, from the time that you married--which was 1939, until 1945--were you also covered under her health plan? Was it a group plan, that covered the husband?

Adelson: I don't recall that. I don't recall using the plan. In fact, I don't recall really having the need for it.

Huth: Do you think she used it during that time?

Adelson: Probably peripherally.

Huth: But not for anything major?

Adelson: For nothing major, no. We were both in good health and young.

Huth: When your wife was working at the Richmond Kaiser shipyards [Permanente Metals Corporation], did she become acquainted with any of the early pioneers of the Kaiser medical care program?

Adelson: I don't know. I don't think so.

Huth: I thought perhaps she had met Avram Yedidia since he was there at that time.*

Adelson: She may have met him there during that time, but I don't think that there was any medical connection. I don't recall, from what I've known of Avram, that he was involved with any health care program during those years--he may have been.

Huth: He was filing steel in those days. [laughs] He was in charge of keeping the steel so they could find the pieces they needed. Then, later on--I think it was around 1945 that he began to work for the health plan.

Adelson: In 1945 I was at Shell Development Company, and we were approached by Avram Yedidia--a number of us. We had met him before, and he was in this job now with the Kaiser Permanente Health Plan. He was trying to interest groups of people who worked in industrial establishments in forming health plan groups.

Curtailed Employment, Union Organization, and Emerging Benefit Programs

Huth: One thing we haven't talked about yet is Shell Development and the development of the union there. What can you tell me about the union and Shell Development?

Adelson: Well, there was an attempt to unionize the employees.

Huth: How early was that?

Adelson: It really began at the end of 1940 and the beginning of 1941. It was stimulated by an event that took place in November, 1940, when the company laid off approximately 10 percent of the employees. Here we were, not yet in World War II, but the company's fortunes were spread around the world, as it were. And the parent companies, particularly the Royal Dutch Shell, were feeling the effects of World War II in Europe. The war, as you recall, began in September, 1939.

*Avram Yedidia, The History of the Kaiser Permanente Medical Care Program, an oral history interview conducted 1985-1986, Regional Oral History Office, The Bancroft Library, University of California, Berkeley, 1987. Avram Yedidia is a personal friend of Valerie and David Adelson.

Adelson: So there was a decision made to have this curtailment of employment. And this of course stimulated all sorts of interest in job protection. The layoff was--then, and since then--referred to by people who were around in those days as the "blitzkrieg." This was taken, as it were, from the term used for the progress of the German Nazi armies through Western Europe in 1940.

So a union organization program began, and this went on for approximately a year. Then an election was held under the auspices of the National Labor Relations Board (NLRB), and at this election the employees voted in two groups: one, known as "Group A," were the non-professional workers; and one, known as "Group B," were the professional workers. Excluded from both units were the office workers. This had been a decision of the NLRB after a number of hearings were held. The company had resisted the idea of having a single bargaining unit, and the company prevailed.

At an election that took place early in 1942 Group A won, and the union was certified, and Group B lost. And I was a member of Group B, but I was very much involved with the union and interested in its general program.

Huth: Were you involved in the election campaigning too?

Adelson: Oh, yes, in the campaigning, in the persuasions and so on.

A contract was negotiated with the company in the spring of 1942, and I participated in the negotiations. I remember we tried to get some social benefits, such as maternity leave--because there were a number of women employees involved--and that we did not succeed in getting that. So it was really just wages, hours, and to some extent, working conditions that entered into the contract.

In the meanwhile--this contract was renewed then a year later and renewed again--there were no medical programs or benefits. The only related kind of benefit that was available--to all employees--was a group life insurance benefit.

Huth: What was the benefit?

Adelson: Well, depending on your rank, your status, and your salary, you were covered from a few thousand dollars up to--the top figure as I remember it was around \$8,500. The company paid part of the premium, and then a small premium was deducted from your paycheck.

Huth: The beginning of employee deductions.

Adelson: Yes. I think this group life insurance benefit was also provided by other companies; it wasn't just at Shell. But in those days that was the only general benefit that could be in any way related to health, or life and so on.

Union Sponsored Kaiser Permanente Health Plan Opened, 1945

Adelson: In 1945 at the contract negotiations we were already aware of the fact that the Kaiser health plan was going to be open in June, 1945, to the public generally. I believe this was what Avram Yedidia was gearing up to.

Huth: It was the first opening to the public?

Adelson: Yes. They were gearing up to getting membership through factories, and industrial groups, and office groups and so on.

So that is how we were approached. And we attempted in that 1945 negotiation to open the door in this regard, but we were not successful. We were able to form a group at Shell Development sponsored by the union [Federation of Architects, Engineers, Chemists, and Technicians] and open to any employee.

Huth: Was that in 1945?

Adelson: Yes. And the plan was open to the public generally in June, 1945, and my wife and I joined immediately.

Huth: How did you know that you wanted to join immediately? What kind of information did you have?

Adelson: Well, we had been given details of what was planned by Avram Yedidia. The rates were modest, and there was an Oakland facility. The old Fabiola Hospital had just been taken over by Kaiser and was used chiefly as a maternity center. Then there was this adjoining building which constituted the hospital, the doctors' offices, and the clinics. This was a two-story building that still exists today.

Huth: Wasn't it built by Dr. Sidney Garfield and Associates?

Adelson: Yes.

Huth: Were you in on any of the negotiations leading up to this? Were you in a group that worked on that?

Adelson: No, we just simply knew what was going to be available; we were sold on the idea; we wanted to get in on it.

We had nothing to do with the organization of the health plan, or anything of that sort. It was already pretty well laid out. We were interested in forming a group at our place of employment, and we succeeded in starting with a reasonably large unit.

Adelson: The dues for the Kaiser health plan were paid through the union. You paid it either through a shop steward on the job, or you brought it to the union office. In those days, the union had an office with a full-time secretary. Then the union sent the money for the health plan dues directly to the Kaiser offices. And I believe the union was given a small stipend, like forty or fifty cents per member per month for collecting the dues. That is, they retained forty or fifty cents of whatever the dues were.

Huth: Do you remember what the dues were?

Adelson: Yes. The dues in those days were: If you were a married couple without children, it was \$6.65 per month; if you had one child--and that's the status we were in when we joined in June of '45--it was \$7.75 a month; and \$8.85 for a couple--parents--with two or more children. And it remained at that level for several years.

Of course, the services that were offered were more limited than they are today, but the basic services were there. I mean, you were covered for health and hospitalization, and the basic needs of a person who needed medical or surgical attention.

Huth: Were you in on the union group that worked on this before it happened? Were you a member of a committee, or an employee group that worked on this?

Adelson: Oh, yes.

Huth: Can you tell me anything about what preceded this?

Adelson: Well, we were approached by Mr. Avram Yedidia, and became very much interested.* We were union members, and rank and file union leaders, and we were persuaded by these contacts that this was a good thing, and it was worth following up on. And we did just that.

Huth: Did you meet any of the health plan leaders at that time--such as Dr. Sidney Garfield, or any of those early people?

Adelson: I don't recall--no. I never met Dr. Garfield, and I don't remember that we really had any contact with the medical staff prior to forming this group. However, I was acquainted with several of the "founding fathers" of the Kaiser group: Dr. Cecil

*Yedidia interview, Regional Oral History Office.

Adelson: Cutting, Dr. Morrie Collen, Dr. August L. Baritell, and Dr. Robert King.* And shortly after the group was formed, we did meet with a number of the doctors.

Huth: Why did you meet with them? Was there something you were checking on?

Adelson: We wanted to get some professional guidance from them as to how to handle members, or potential members, who needed more information and persuasion than we with our limited knowledge were able to give them.

Huth: Did they have a brochure at that time that explained things?

Adelson: Well, there were some small brochures. Unfortunately, I don't have any of them.

That is how it began.

Huth: That's an interesting story. What was your job in the union?

Adelson: Well, at that time I was president of the local that was to be covered by this particular plan--although it was not covered by any collective bargaining agreement, and never was in subsequent years. We never achieved the other end of our goal. But we did cover our uncovered members, as it were, or our non-covered members--we covered them with the health plan.

Huth: Were you the president of the local at the time you joined the health plan?

Adelson: Yes. I was really on the way out of office, as it were.

Huth: But you had worked on it before that.

Adelson: Yes, right.

*Cecil Cutting, M.D., The History of the Kaiser Permanente Medical Care Program, an oral history interview conducted 1985-1987, Regional Oral History Office, The Bancroft Library, University of California, Berkeley, 1986.

Morris Collen, M.D., The History of the Kaiser Permanente Medical Care Program, an oral history interview conducted 1986-1987, Regional Oral History Office, The Bancroft Library, University of California, Berkeley, 1987.

Huth: Was there any reluctance on the part of the company?

Adelson: Well, we tried to persuade the company at first through contract negotiations for the collective bargaining group known as Group A--to have payroll deductions for health plan dues. The company was not interested. The company just felt that the medical program as it then existed--fee-for-service for physicians and hospitals--was a purely individual matter and should be left that way.

When we were not able to get it in the union contract, we tried to persuade the company to open this to everybody, regardless of union membership or contract coverage. In other words, open it to any employee who would give written authorization to the company to withhold the health plan dues from a paycheck and send it in to the health plan.

At this point we were not trying to get the company to make any contribution toward the health plan dues. Earlier--when we made attempts on behalf of the Group A people who were covered by a collective bargaining agreement for health plan coverage--we tried to persuade the company to have some kind of a matching fund type program. That was considered to be "far out." They weren't going to become pioneers in that respect.

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Huth: At that time were you aware of any other companies that had matching fund programs?

Adelson: No.

Huth: So it was really something new you were asking.

Adelson: It was something new, and I don't know when Mr. Yedidia and his colleagues first succeeded in getting that sort of thing through company collection, but I know that did follow ultimately with many governmental units and some other employers.

But we had in this group of basically Shell Development employees, some members who worked for Shell Oil in Martinez, and we had some who worked for Shell Chemical in Pittsburg. You must remember that the Richmond hospital remained open after the war, and it became part of the Kaiser health plan system--that is, available to the Kaiser health plan members.

Huth: Shell Chemical in Pittsburg was pretty far away from Richmond and from the Oakland facility--so what happened there?

Adelson: And that is also true of Martinez. But many of the employees lived in the Bay Area. Californians have always been great commuters--traveling to jobs.

- Huth: During the war, people began traveling to jobs, and it became a way of life after that.
- Adelson: Yes, they would live in one community and work in another, and no one thought anything about it.

Kabat Kaiser Institute, Vallejo

- Adelson: In this time period, Kaiser had a facility in Vallejo, which was of importance and attractive to people who were interested in this type of health plan coverage. This was established because Kaiser had an arrangement with the United Mine Workers Union, which was then headed by John L. Lewis. This arrangement was for rehabilitation work--medical and other related types of rehabilitation work--for mine workers who had been injured in mine accidents.

We were quite impressed with the program they had developed at Kaiser in Vallejo. They brought these injured mine workers to there. They also had arrangements for housing their families--the whole family would come out.

- Huth: And would they usually be there for a few months at a time?
- Adelson: A few months or longer.
- Huth: Do you remember the name of that facility?
- Adelson: Well, at Vallejo it was called the Kabat Kaiser Institute. Kabat was a physician--Dr. Herman Kabat--who, as I recall, lived in El Cerrito, not far from where we are sitting now. He developed this program with Kaiser and was the medical director of it. He later left Kaiser and went to the East Coast--I believe to the state of Connecticut.
- Huth: Do you know whether he's still living or not? Have you heard anything about him since he left?
- Adelson: I don't know. Except--I have a friend who I may have mentioned to you in our preliminary planning interview, who is a physician, and who lives in southern California.
- Huth: Is that Dr. Levine?
- Adelson: Dr. Milton Levine. Dr. Levine worked with Dr. Kabat in Vallejo.
- Huth: And do you think he might know about Dr. Kabat's whereabouts?
- Adelson: I'm quite sure that he would know where he is, if he is still living.

More Family Background: Remarkable Daughters--Naomi and Janeth

Huth: When you told me about your family, one thing we skipped was the story about your daughters. What can you tell me about them?

Adelson: Well, we had two children: Naomi, who was born in Berkeley at Alta Bates Hospital, April 26, 1945, and who was covered by the Kaiser health plan beginning approximately June 1, 1945, when she was just two or three months old. Naomi unfortunately expired on March 15, 1970, as a result of losing a battle with Hodgkins's disease over a period of years. Our second child's name is Janeth. She was born at Kaiser hospital [Oakland] in what was the converted Fabiola Hospital unit, on April 8, 1948. Both of our children were Kaiser health plan members throughout the years, covered as we were.

Janeth is presently a board certified general surgeon with Kaiser at Santa Theresa Hospital in San Jose.* She began with them in June or July of 1979, and has been there continuously. Both of our children graduated from the University of California with bachelor's degrees. Naomi graduated from the Davis campus, and Janeth from the Santa Cruz campus. Janeth was in the first entering and first graduating class of the Santa Cruz campus of the University of California. She entered in 1965, and graduated in 1969.

At the Santa Cruz campus Janeth had an opportunity to spend her junior year abroad, and was at the University of Birmingham in Birmingham, England, and was really basically a biology major. She then returned to Santa Cruz for her senior year, was graduated, applied to a number of medical schools, and was admitted to the University of Southern California Medical School in Los Angeles, where she began in September, 1969, and was graduated in June, 1973. She then accepted an internship at Beth Israel Hospital in Boston--one of the Harvard Medical School teaching hospitals.

After being an intern there she became a resident, and during the first or second year of her residency she was sent on a rotation basis to the burn and trauma unit at San Francisco General Hospital, which is connected with the University of California Medical School. She spent six months there, and then

*In January 1986, Janeth Adelson, M.D., was appointed to a two-year term as chief of surgical services, and in January 1987 as assistant chief of surgery for the Permanente Medical Group at Kaiser's Santa Teresa Hospital in San Jose.

Adelson: returned to Boston. Then her third year as a resident at Beth Israel was spent at Guy's Hospital in London. It's a very, very old hospital. In England the medical schools are really in the hospitals. You don't hear of separate names for medical schools.

So she remained there for a year and then returned to Beth Israel in Boston. At Beth Israel Hospital she was a resident in general surgery, and she was the first woman to complete the intern and residency training at Beth Israel Hospital. There have been many since then. In her fifth year there she was the chief resident in surgery. She decided she wanted to work in her field in her home state—California, returned to California, applied to Kaiser, and was hired at Santa Theresa.

Huth: Had she had contact with Kaiser through the USC medical school? I know some of the doctors at Kaiser have taught at USC Medical School, and I wonder if she ever mentioned that?

Adelson: I don't recall that. No, she did not.

Huth: The medical director for the southern California Permanente Medical Group, Dr. Raymond Kay, taught for many years at USC Medical School.*

Adelson: Well, you see, she became interested in surgery very early in medical school, and one of the doctors there, who may have been the chief of surgery for the medical school, was a source of great inspiration to her. This was a Dr. Arthur Donovan. She may have met some others.

Huth: But perhaps she heard some detail about the Kaiser program?

Adelson: Well, we had her covered by Kaiser throughout this period, including the time she was in medical school. You see, it was possible in those years, if an emergency arose and she was in Los Angeles, to use the Kaiser facility in southern California.

Huth: And your other daughter went to U.C. Davis?

Adelson: Yes, and she graduated. During her freshman year at Davis she was diagnosed as having Hodgkins disease. This diagnosis was made by Kaiser in April, 1963. She had been at Davis since the preceding September, and we had arranged, just routinely, for a physical check-up during the Easter break in April of 1963, when she would be home.

*Raymond M. Kay, M.D., The History of the Kaiser Permanente Medical Care Program, an oral history interview conducted 1985-1986. Regional Oral History Office, The Bancroft Library, University of California, Berkeley, 1987.

Adelson: The physician who examined her— She had no complaints; this is an insidious type of ailment; you can have it, and a trained physician will detect it by seeing an unnatural lump in the neck area, and that's exactly what happened. This doctor, Dr. Yukio Kawamura, is still on the staff. He had been a physician who took care of both of our girls after they got out of the pediatrician stage.

Huth: Was he in general medicine?

Adelson: Right. He had a biopsy made the very next day. He saw her on a Thursday, and on Friday morning he had the biopsy taken. And the head of pathology then was a Dr. Morgenstern. I don't know whether he's still there or not; he may be retired by now. Both doctors reported to us--my wife and I were down at the hospital waiting anxiously--that this was what had been found. We were immediately referred by Kaiser to the Stanford Medical School, which was doing pioneering work, and continues to do it in the field of Hodgkins disease and related malignancies.

So throughout the remainder of her freshman year, and thereafter, Naomi was monitored and treated at Stanford in Palo Alto, and also followed by Kaiser in Oakland.

Huth: And while going to school in Davis.

Adelson: Yes, while going to school in Davis. All of this was covered by the Kaiser health plan. The only expenses encountered by the family were for transportation.

Huth: Have you ever heard of anyone else who was similarly covered by Kaiser, who went to Stanford for the same kind of care? I wonder if, at that time, there were others?

Adelson: No. Well, there probably were others, but that sort of information is very private and confidential, and you will never hear it from a physician.

Huth: I thought perhaps someone you knew might have told you about it.

Adelson: No, and during the time we were going there for radiation treatments and the like we never ran into anybody who was sent from Kaiser. But I know that Kaiser has sent people to various places, like UC [Hospital and medical school] and Stanford. for facilities and treatment that Kaiser wasn't offering at the time. I know this has gone on through the years.

In fact, as I mentioned in our preliminary interview, when I developed an aorta valve murmur, Kaiser sent me to Stanford for confirmation and for surgery. And again, that was covered by the health plan.

Huth: Shall we stop now, and then go on next time?

Adelson: Yes. we've got one more session for the rest. I haven't worn you out, have I?

Huth: No. how about you?

Adelson: Oh, I'm all right. I'm in a profession that is accustomed to talking, unfortunately.

Huth: I'm pleased that talking is so easy for you.

Adelson: [laughs] Well, I don't know about that, but at least sometimes we're accused of talking too much.

Huth: This has been very interesting, and we'll look forward to more at the next session.

Adelson: All right, then we'll get into the other interview next Wednesday at noon. I've held the time open.

III LEGAL STUDIES, AND STORE FRONT GENERAL LAW PRACTICE, 1946 TO DATE

[Interview 2: March 26, 1986]##

Huth: Today, will you please tell me about your job change, when you changed over to the practice of law, and how you happened to do that? When you studied law, and how you happened to make the job change when you had so much preparation and a successful career as a chemist?

Adelson: I began the study of law in August, 1946. I enrolled at Golden Gate University Law School, which was then located on Golden Gate Avenue in the YMCA Building in San Francisco. I attended classes there from August, 1946, through June, 1950, including summers--summer sessions as well as fall and spring semester sessions.

I was graduated in June, 1950, with a degree of Doctor of Jurisprudence, and made application to take the State Bar examination to practice law in California. I was accepted as a candidate to take the bar exam, and I took it in the beginning of October, 1950. On December 18, 1950, I received a letter advising me I had passed the bar exam, and could present myself to be sworn in either in San Francisco, or Los Angeles. I selected San Francisco. The date was January 11, 1951.

On December, 19, 1950, the day after I received notification, I submitted a hand-written letter tendering my resignation from the Shell Development Company, giving them one month notice to that effect. The company was very gracious about it, and indicated to me that I could leave earlier if I wished, and I did. I was sworn in on January 11, 1951, and I resigned effective January 12, 1951. And I severed my formal connections with Shell Development Company at that time.

I had become motivated in the direction of studying law and going to night law school while working at Shell Development--through my work with and expanding interest in people and their general welfare during my entire period of employment at Shell

Adelson: Development Company. I had come to the decision in the middle of the 1940s that it would be wise, in view of this interest, to undergo a change in my career, and I made that decision. I went to law school with the full knowledge of the company, and with no criticism or reprisal--I use the term advisedly--from them. During the four years plus that I was in law school, I continued to work full-time as a research chemist.

On leaving Shell Development and starting out in the practice of law, I opened an office on February 1, 1951 at the corner of 45th Street and San Pablo Avenue--the street address is 4348 San Pablo Avenue. At that time there was no office space as such, or in the conventional sense of the word--available in Emeryville. What is now the Watergate area there, with several large office buildings, was non-existent. It was still being used as a garbage dump. The Bay was being slowly filled with garbage and debris of all sorts--it was all down in that bayfront area.

So I could find only what had been a corner meat market which was vacant, and I leased the premises from the owner, and converted it internally into an office, and began to practice law there.

Huth: So you had a walk-in from the street.

Adelson: I had a walk-in from the street.

Huth: Wasn't that unusual?

Adelson: It was unusual in those days. Now, it's much more commonplace.

During my last year at Shell Development Company several of my fellow employees, whose names I obviously cannot disclose, had pending legal problems. They assured me that they would hold off taking any action until I had set myself up in law practice. I felt, therefore, quite rewarded--I passed the bar exam at the first attempt, and I started to practice law on February 1, 1951, and I had many clients that came from Shell Development Company. I actually walked into my office on February 1, 1951, with five divorce cases in my hip pocket, and began as a solo practitioner, and I remained as a solo practitioner all through the ensuing years.

Huth: Did you have staff? Did you have a secretary in the beginning?

Adelson: At the beginning my wife worked with me doing secretarial work, typing and the like. She worked with me for approximately fifteen years. During that time I had other help. I would farm out for typing what we call "heavy work" that entails a great deal of typing of voluminous materials.

Huth: So she became a legal secretary, would you say, at that time?

Adelson: She was right in the middle of it all.

Huth: I know that you can't reveal the names, but other than the divorce cases, what other types of cases did you have in those very early days--that perhaps came from Shell? What kinds of things were they "holding off on" for you?

Adelson: Well, a great deal of the initial work came from Shell people and friends in the community, by way of referral. I knew a great many people around the East Bay Area. So I started what we now would call "family law:" divorce cases, and the dissolution of marriage cases--annulments. I did work initially on some guardianships of minors. and I also, by way of referral, did a fair amount of criminal law defense work.

In that period of time, and perhaps even today, lawyers who are starting out anew in private practice do a fair amount of criminal defense work. As the years went on I did a great many wills—I began that right at the outset--preparing wills for people who were dying. Later, I got involved in probate of estates and guardianships of incompetents.

Huth: Did it include conservatorships?

Adelson: Yes, conservatorships. In the early days they were called "guardianships of incompetents." At about the time I began practicing law, that term was regarded to be somewhat oppressive and inaccurate because many people just resented being called incompetent. In their eyes, they felt the term inferred that they were developing senility. There wasn't any problem about that, so the legislature changed that whole picture.

Huth: Changed the term?

Adelson: Yes, changed the term.

Huth: So what you had was almost a general practice.

Adelson: It was a general practice, and it remained a general practice until recent years, while over the years it gradually became heavier and heavier in wills, and conservatorships, guardianships, estates of decedents, and estate planning. And in connection with all those subjects many things are involved that are in related fields of law: real estate problems. contract problems and the like.

Continuing Connection with Shell Development, 1951

Adelson: Over the years I did a great many cases involving workman's compensation wherein I almost exclusively represented the injured employees. One of my cases--possibly two or three--one I recall in particular involved the Shell Development Company as employer. In that particular case, and I think in two or three other cases I had involving them--while we were adversaries, I felt that we got along splendidly. We resolved the problems, I think in every case, ultimately by what we call compromise and release, which was a form of settlement. I felt very good about it.

Huth: Do you think that your past experience, having been with the company, helped you know how to negotiate?

Adelson: Well, I think that was one element, and I think there was also a degree of respect from the company in this regard. I felt particularly good about being able to resolve problems in this fashion, because the company was self-insured. As a rule, it is more difficult to settle a case with an adversary that has to pay the bill than it is to settle a case with an insurer who usually is willing to settle and get rid of you and get rid of the case.

Huth: And perhaps settle out of court?

Adelson: Well, yes. with the ultimate approval of the court.

Throughout those years friends of mine at Shell Development referred people to me, and in many instances they would actually bring someone to the office and introduce them to me. So I got a great deal of support, at least from former colleagues, some of whom had been adversaries in connection with the unionization work.

Huth: Did some of these people who had been adversaries later become good friends?

Adelson: A few of them became clients.

Shell Development Company made a major decision in the '60s, and that was to relocate its facilities. This was done gradually at the end of the '60s. and in the early '70s, and was complete in the year 1972 when they moved away from Emeryville and set up new research laboratories in Houston, Texas.

Huth: I have a friend who was a chemist at Shell Development, and who went to Houston at about that time--at the end of the 1960s. He was very active in the union. And he told me that one of the

Huth: reasons they were moving was because the union was getting too powerful in this area at that time. Their demands were getting met, and it was a way to put a stop to this activity.

Adelson: This was true, I believe, but it was not the union that I had worked to establish. As I told you, the union succeeded only in winning recognition in the contract for the non-professional employees. We lost the election for the professional employees.

However, in the process of organization and struggle there arose a rival organization known as the Association of Industrial Scientists, which was an unaffiliated organization. The union that we had worked with, the Federation of Architects, Engineers, Chemists, and Technicians, had been affiliated with the Congress of Industrial Organizations (CIO). The Association of Industrial Scientists remained, it grew, and it ultimately had an election in the end and was certified as the bargaining agent for the professionals.

There were negotiations and contract studies, none of which I was privy to, so I really can't say anything about it. But what your friend told you probably has considerable merit because the general impression was that the Association of Industrial Scientists had become a thorn, as it were, in the employer's side.

The non-professional employees, at that point, had the union that had represented them in the days that I was there, and which was succeeded by another union, which was a local branch of the Oil Workers Union, that's now known as the Oil, Chemical, and Atomic Workers Union, and is still affiliated with the Congress of Industrial Organizations, now the AFL-CIO. And when the company finally moved to Houston both unions were left at the church.

Huth: They didn't go with the company, then?

Adelson: Not officially, and from what I understand, they have not been unionized. But I do not know the answer to that. The only employees that the company took to Houston were professionals who elected to go. Many did not wish to go. They changed jobs, or they took early retirement, or they simply stayed behind. Many of them who did go, who remained with the company, would come back periodically for visits, and I would see many of them from time to time when they were in the Bay Area. I still do.

Huth: When they retired, then, did they move back here?

Adelson: Many moved back to California. Many were fortunate enough not to have sold their homes, so when they moved back in the early '80s they were not caught in this inflationary situation involving the purchase of a home.

Adelson: But there was a great deal of coming back to visit the Bay Area by these people. I remember one man in particular, an unmarried man who was a research chemist, who I would see from time to time when he was back here. He had been a very studious and devoted person insofar as the San Francisco Opera was concerned. And there was nothing in the State of Texas that approached the San Francisco Opera, so he would often fly in for a weekend and go to the opera and go back.

But as I say, there was a great deal of contact with these people.

Health Plan Coverage Through Berkeley's Consumers Cooperative
(Co-op)

Adelson: My understanding is that after I left Shell at the beginning of 1951, others who had not been interested in or involved in the union movement at all joined the Kaiser health plan. There were ways of doing this, and it may have been—I don't know, I don't have the facts on this—it may have been that the new union group there was able to make some sort of an arrangement with Kaiser. I've never looked into that.

There were other organizations that they could deal with. For example, when I left Shell Development and began to practice law at the beginning of 1951, we were transferred to a group that I recall had the name, "The East Bay Medical Group," which was sponsored and run by the Consumer's Cooperative of Berkeley--referred to as "the Co-op." They collected the dues from members, and transmitted the dues to Kaiser monthly, and received a small commission for each dues collection that they made. We remained with them for a great many years--I do not remember the year in question--but they finally ceased operating. But when that happened we were just retained as individual members.

Huth: It's still under the Co-op--at the present time, at least, they still have a Co-op group--but they're individual members, and they pay individually, directly to the health plan. It's better coverage than you would have as an individual for the same amount of money. I know this because my daughter has just recently joined as that kind of member.

Transfer to Coverage as Parents of a Kaiser Doctor

- Adelson: We remained as individual members for some years, and then our daughter became a member of the physician staff as a surgeon at Santa Theresa Hospital with Kaiser in San Jose. We were then transferred to the status of "parents of a Kaiser doctor," and we have remained in that status. Our dues are deducted from her monthly stipend, and we simply reimburse her. But it's deducted by a payroll deduction scheme.
- Huth: Do you know when that transfer happened? Would it have been when she became a Kaiser Permanente physician?
- Adelson: Yes. July, 1979. And our coverage, as a result of that, improved. It's a better plan--to be a parent or a parent-in-law of a Kaiser doctor.
- Huth: Was it a better plan than it was either with the union or with the Co-op?
- Adelson: Oh, yes. much better.
- Huth: Maybe we can hear more about that later when we have some more questions about the differences between coverage plans.

IV PERSONAL VIEW OF THE KAISER PERMANENTE MEDICAL CARE PROGRAM

Huth: We're ready to talk about your experiences, contacts, and perspectives on the Kaiser Permanente medical care program. What can you tell me about your personal experiences and learning to work with the system of providing health care? Perhaps we could hear about how the coverage was different when you became the "parent of a Kaiser doctor." Maybe then there was less need to learn to use the system after you had better coverage?

Adelson: Well, what I understand about "working with the system" is this: I think, in connection with any health care plan that a person involves himself in personally, one has to know how to shepherd himself in and through the process. And, I think, to the extent that some people--as I look back over the years--have criticized Kaiser and have even left the plan, it is because they never learned how to use the health plan system, or were not interested in learning how one shepherds oneself in connection with a health problem.

On Being an Aware User, Choosing Physicians, and Cooperative Dealing with Staff

Adelson: As I look back on the whole process, I believe you have to know how Kaiser is set up and organized, and there are no secrets about this. Kaiser has always been a very open organization in terms of its relationship with members. So you learn how it's set up, and if you don't know, you can easily inquire how you get started.

So if, for whatever reason, you don't have a doctor, or you're brand new--you've just joined--you find out what the first step is. You are urged to select from the medical staff a doctor who you will use on a regular basis when and as needed. You make this selection in much the same way that you would make it out in the fee-for-service medical community.

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Adelson: You consult your friends, colleagues, and older members of Kaiser for recommendations based on their knowledge and experience, and then you simply get an appointment with this particular doctor.

Huth: Is there ever a chance to actually go in and interview the doctors, such as is now done with fee-for-service physicians? Have you heard of a patient going in to talk to a doctor before making a choice?

Adelson: Well, I've heard of people who, on their first visit or two with a doctor, decided that they did not want him or her as a physician, so they changed doctors. I've never heard of it referred to as a screening process, but I have heard of many cases where people, for whatever reason, decided early on that they would want to be treated by somebody else. And so it has happened.

I have never heard or known of a case--and I've had contact I would say with hundreds of people over the years--of a person being told that "Dr. X is your doctor, and you are assigned to him." The external propaganda, which continues to this very day--that you don't have a choice of doctors--is simply not true--completely untrue.

Now, even on the referral basis sometimes your doctor, who's usually an internist, feels that your particular ailment at the moment--that you're discussing with him or her--is something that's covered by another specialty in another department. He will simply say, "Call for an appointment, and select whomever you want in that department to take care of your orthopedic problems," or whatever your problem happens to be.

Huth: Do they ever suggest a doctor to you?

Adelson: No, I don't recall a case where they say, "Go see doctor so-and-so." So again, you have the opportunity of doing what you would do in the fee-for-service area, namely, consulting friends and acquaintances who you know use Kaiser, and asking them if they've ever had somebody in this department to which you're being referred, and you start that way. If your problem is not that severe, you can sometimes call up and say, "I'll take anybody--the sooner the better." But, I think, for the most part the choices are made just as they're made in fee-for-service.

Huth: Did you ever just take anybody at any time and have it work out?

Adelson: Well, not that I've stayed with. You know the Kaiser system has what's called the short appointment program. If you become ill--you wake up in the morning and you feel that you're in bad shape,

Adelson: and you can't be seen by your own doctor, although in many cases you're able to call the doctor and tell his nurse what is wrong-- your doctor's nurse will tell you to come down between such-and-such a time and such-and-such a time, and just sit, and they'll work you in.

Sometimes that is impossible if the doctor's out of town, or on vacation, or just completely tied up. Then you go for the short-term appointment process, and you will see somebody that very same day, and it's invariably an internist who is fully qualified--sometimes they are newer doctors who do not have the patient load that an older doctor would have. So I have used that on a number of occasions. I've always found it very satisfactory. And you have to remember that what the newer doctors may lack in experience they often make up for by the more recent aspects of their training, which is a very helpful thing.

I'm sure you know that the emergency room system is available, if you're really in what you consider dire straits—I use the term advisedly.

Huth: And would you find a fully qualified doctor in the emergency room?

Adelson: Oh, yes. You go to the emergency room, and you are seen immediately by a team of people, including one or more fully qualified doctors. Actually, in the present day scheme of things the emergency room is one of the subspecialties, and some doctors gravitate into that.

The emergency room procedure is that you're checked completely, and if necessary you're hospitalized right then and there. The appropriate specialists are brought into play. In an emergency I don't think anybody will make a long and studied selection of a doctor. You take people who are qualified and immediately available.

Huth: Especially in an emergency room you would.

Adelson: Right. So these sorts of things, to me, are rather straightforward.

Huth: Would you think that knowing how to use the system might be partly due to your professional background and education? Would you think that, say, an ordinary laborer who is also a Kaiser member would be helped by what's available there at Kaiser, and able to get the same kind of care and services?

Adelson: Well, I think a laborer or a minimally educated person can easily use the system, if he or she would devote himself or herself to just learning a few simple methods of approach. Now, there are a number of people in the world who don't function that way, and

Adelson: they're not necessarily in the minimally educated classes. Some are careless, and some are disinterested, but I think, on the whole, you don't have to be a highly educated or sophisticated person to learn the rules or the procedures.

It does call for a degree of patience in shepherding yourself hither and yon. The first thing you have to remember is that most people that are involved in the delivery of health care services are usually overworked, and are usually thrust into what I call a "crisis environment." A crisis environment can be such that as a receptionist you have people drop in on you all day, or you have the phone jangling on all sides of you.

So in dealing with these people--the receptionist people who have to schedule you and find a niche for you and so on--you have to bear these things in mind and work with them--don't push them. See, I think some people that have had problems with Kaiser have had them largely because they fight the system rather than work with it.

Huth: Is it a matter of personality type?

Adelson: Possibly. Yes, I think that is true of many things in life, not just health care. In dealing with your butcher, your pharmacist, your dry cleaner--you name the category--it's a similar sort of thing, really the old adage of "live and let live."

Huth: Can you think of any particular problems that you ran into, or did anything stand out that could have been better handled by the staff at Kaiser? Or is there just such a generally good picture that nothing really comes to mind?

Adelson: Well, of course, as with anything in life there are minor irritations. I did not know of, and I never experienced any major situations for which I would say, "Well, this is terrible," or, "This is bad."

Huth: Or where you had to report something to someone else?

Adelson: Or go over somebody's head to someone else.

Huth: You didn't ever have to do that?

Adelson: No, no. I think, from the viewpoint of the user the coordination and cooperation on the other side of the table, or the bench, really comes across quite well.

Huth: Did you ever run into any problems in the waiting rooms that you can think of?

Adelson: Well, on occasion I've had to wait, but not very often. Emergencies arise, and doctors are delayed by matters beyond their control. So one from time to time has to wait, is delayed, but I've never seen it as a major thing. Although, on what few occasions I have experienced it the staff have always explained the delay, and they will come out and talk to you periodically and tell you what is going on. You don't feel neglected, and it's quite cooperative.

Two Examples of Quality Care in Special Situations

Huth: You had a period after your wife stopped working for Kaiser, and before you joined the Berkeley Co-op group, when you were going to fee-for-service physicians and using the Alta Bates Hospital. So you had an opportunity for a good comparison there as to things like waiting in doctors' offices, and whether it was any different than you experienced in fee-for-service care. Can you comment on that?

Adelson: Well, I'll give you a specific example.

Picking Up Blood at the Irwin Memorial Blood Bank, San Francisco

Adelson: When my first child was born on April 26, 1945, at Alta Bates Hospital, a problem developed which caused my wife to hemorrhage, and which required a blood transfusion. Now, this was 1945. This child was born on a Thursday, and the critical thing developed that night. By the next day--Friday--my wife had even at that time what I call the "fifth day of the week" syndrome: if one is going to expire, get ill, create any problems--

Huth: [laughs] You don't want to do it on the weekend.

Adelson: Don't do it on the weekend. Not just for your personal needs, but if you need a plumber, or whatever, try not to do it on the weekend. Anyway, so it developed that she would need blood transfusions, and the blood bank at Alta Bates was very short on blood for her particular type. She's not a type O, she's a type B with some other subheadings to it.

They were not able to assure me that they would have this particular type of blood on hand. So I just simply drove over to the Irwin Memorial Blood Bank. In other words. I didn't have the

Adelson: confidence that they would either have this blood, or that they would go out and get it if they didn't have it, if they needed it--or how quickly they would get it.

So I drove over to Irwin Memorial Blood Bank in San Francisco and got two quarts of blood.

Huth: You could do that in those days, just go over and pick it up?

Adelson: Well, I had a note from them. They put the blood in a jar and shielded it with something or other.

Huth: To protect it.

Adelson: It was protected. It was also shielded for proper temperature. And I then drove back across the bridge with these two bottles sitting on the front seat of the car next to me, and I drove with one hand, holding with my other hand to be sure these bottles didn't tip--I didn't want them to leak, or whatever.

I'd never had an experience, or a feeling of that sort--

Huth: Where you had to go out and do it yourself.

Adelson: In order to be sure. Quite the contrary. Dealing with situations of that sort--they go beyond the call of duty. After my heart surgery--

Huth: That was going to be my next question, so why don't we just go right into that.

The Best of Care Preceding and Following Major Heart Surgery in 1971

Adelson: I was visited with great regularity by a registered nurse [RN] from Kaiser, who came directly to the house and checked certain vital processes--pulse, blood pressure, temperature, etcetera, and who was also very observant. If she noticed something that seemed to be somewhat amiss, she took note of it and corrected it. She had various and sundry supplies with her and so on. I'll come back to this. if I may.

I had been hospitalized over the years on three different occasions--with Kaiser. The first occasion was for a hernia repair. This was in 1970. The hernia was discovered in a routine physical check-up by an internist I was seeing at that time.

Huth: Was that part of the multiphasic check-ups then?

Adelson: No.

Huth: Was that before they had multiphasic examinations?

Adelson: This was not detected in the multiphasic, but it was detected in just a routine office examination. And I was hospitalized and treated very satisfactorily in this connection by Kaiser. I was in the hospital five days, and was completely satisfied by all that went on. The surgeon was a man who was then head of the department--I selected him after I asked friends.

Huth: Who was he?

Adelson: Dr. Donald Grant. I'm quite sure he's retired by now. Then, in the spring of 1971 I had a multiphasic examination--this was April 9, 1971--and I was scheduled for what's known as a "return multiphasic examination" by an internist, a Dr. Eduardo Capot. He took one look at the multiphasic printout, and reached for his stethoscope, and started to come around the desk. And he said, "I don't need this instrument, I can hear it and see it from here"--namely, that my heart was beating too rapidly and making noise. It was a murmur.

The test in the multiphasic disclosed this--what was known as a "vital capacity test," which for some reason they have discontinued in recent years.

Huth: Is that the one where they had you running on a treadmill?

Adelson: No. I've never had a running test.

Huth: They do it as a sport and fitness test.

Adelson: Treadmill. No. I've never had a treadmill test.

Huth: An electrocardiogram [EKG], maybe?

Adelson: No. this involved blowing into a tube--

Huth: Oh, yes, I remember that.

Adelson: --which then was connected with an instrument which made a record of it. And Dr. Capot said this test immediately told him that I had some sort of insufficiency--in other words my capacity to blow into that instrument was greatly reduced. Anyway, to get right to the nub of it, a grade one heart murmur had initially been detected and grew rather rapidly. By the time I saw this man, Dr. Capot, in the beginning of June, 1971, it was a grade four, which is pretty near the top of the scale.

Adelson: He personally made the referral. He said, "You're going to go into the Cardiology Department. I'm going to make an appointment for you, and you can select whoever you want from the doctors there." I was, through the years, a personal friend of Dr. Joseph Sender, and so right then and there, just from Dr. Capot's office, I called Dr. Sender on the phone.

Huth: He wasn't a cardiologist?

Adelson: No, no, he was chairman of the executive committee at that point. He's an internist, but for approximately twenty years prior to this day in February of 1986 he was very deeply concerned with administrative work. He was the physician-in-chief [of the Kaiser hospital in Oakland]. I asked him if he could make a suggestion as to whom I should select. He named two people, and suggested that maybe I would want to see the older one of the two because he thought our personalities, etcetera, would mesh, and so I was referred to Dr. Albert Bolomey.

So I hung up the phone, and I said, "Dr. Capot, I'll see Dr. Bolomey." He said, "Okay, you sit right where you are, and I will go downstairs"—he was on another floor—"and see Bolomey myself, and make an appointment for the earliest possible date." And he did. He came back, and he said, "You'll see Dr. Bolomey in a couple of days," and he told me the hour. Then Dr. Bolomey took over completely, not just the heart thing, but he became my physician.

Huth: He took over your care.

Adelson: That's right. He put me through a large number of tests, all of which were done at Kaiser, and he also, with my permission, presented me at a session called the "grand rounds." Anyway, you are brought in for a meeting of all the doctors--anywhere from one to ten who are interested in your particular kind of case, and your own doctor presents the facts to them. Then they ask questions of the doctor, and they also ask questions of you. So I went through that.

Huth: All of the others who were asking these questions were doctors?

Adelson: They were all Kaiser doctors--not all of them in cardiology--some of them in other fields. He [Dr. Sender] had Dr. Bolomey arrange for me to be examined by various specialists at Kaiser, literally from the top of my head to the soles of my feet: my hearing, my eyesight, everything that you could think of was checked over. He wanted just to be sure that the diagnosis they were working on was checked out and proven correct.

Adelson: I was even referred to a building at UC [Berkeley]--at that time it was on Gayley Rd.--where I was given some isotope tests. Anyway, the conclusion was that I had aortic insufficiency. Kaiser then arranged through Dr. Bolomey to send me for four days to Stanford Hospital in Palo Alto--

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Huth: Why did Kaiser doctors decide to send you there for four days?

Adelson: I was there for four days, hospitalized as a patient of the Department of Cardiology, and was given EKG tests of various sorts, all related types of tests, including a cardiac catheterization and an angiogram test, which at that time were not given at Kaiser Oakland. All of the tests at Stanford bore out the conclusion that had been reached at Kaiser Oakland, namely that there was an aortic valve leak which led to this cardiac insufficiency.

I had observed, I might say parenthetically, in this connection, that there was something wrong with my own wind power. In climbing a grade I would run out of breath. At the end of May of 1971 I had tried a jury case, and during the trial I noticed that my voice was not projecting itself in a normal fashion. In other words, I would speak, and the sound would not come out normally. It would come out lower. All of this is indicated by this type of condition.

Anyway, after being referred to Stanford. I was scheduled by Stanford at Kaiser's request for open-heart surgery on August 5, 1971. And I was told that my aortic heart valve would have to be replaced. I was also told that there were three possibilities: that one would be to replace it with a human valve, another would be to replace it with a pig's valve, and a third would be to replace it with a totally artificial valve--a valve that's called a Starr Edwards valve--and that I would be discussing all of these possibilities with my doctor at Kaiser. He would consult with them, and a decision would be made in which I would also be involved. So this followed in July, 1971.

Dr. Bolomey recommended that I have the artificial valve--the Starr Edwards prosthetic device, it's actually called. After hearing his reasoning on it--which I don't think I need to clutter the record up with here--I agreed with him, and this is what was installed in the surgery on August 5, 1971. The surgery was arranged by Kaiser, and the arrangement was that Dr. Norman Shumway would do it--and he was the physician that did it.

Huth: It was done at Stanford?

Adelson: Yes, done at Stanford with a team of their physicians and anaesthesiologists, etcetera.

I remained there for one week, and I was then transferred by ambulance--with my wife being permitted to ride in the ambulance with me--from Palo Alto to Kaiser [hospital], Oakland. I was kept at Kaiser, Oakland for another week or so in order to be stabilized. And I was sent home and had to return to Kaiser about five days later because I was having difficulty breathing.

Dr. Bolomey was in charge, and he discovered that there had been a build-up of fluid in the lung cavity. He discussed this with Dr. Shumway and was told that this was often a post-surgical problem. Dr. Bolomey was told to "stick a needle in and draw it out!"--which is what happened.

Then I was kept at Kaiser to make sure I was stabilized all the way around, and because of this type of heart valve I take a blood thinner, which I've been taking daily ever since. With this kind of treatment, there has to be a frequent blood test taken to be sure that your prothrombin time is sufficient--that's measured by how many seconds it takes your blood to clot. I believe the normal blood clotting period is about eleven to twelve seconds, and I'm maintained at a level of around seventeen to twenty seconds. The reason for this is to prevent clotting around the artificial valve, which of course can lead to tremendous problems.

So I was sent home in early September, 1971, and I did not return to my practice until March 1, 1972. During the time I was at home I was visited initially several times a week by a Kaiser nurse. I didn't have to arrange anything; this was all arranged. This registered nurse would come and do certain things--take your temperature, blood pressure, pulse, listen to your heart. In those early days, twice a week she would take a blood sample to be tested in the Kaiser laboratory. Later this sample was only taken once a week.

During this interval of seven months that I was off work, I would go to Kaiser once a month in person--my wife drove me. By December 1971, I was given permission to drive the car again, and I would drive myself, and I would have an examination by Dr. Bolomey.

I'd like at this point to diverge a bit to give you a human interest story.

Huth: All right.

On Proving Illness For Income Insurance Compensation Purposes

Adelson: I had carried what was known as "income protection insurance" all through the years that I was practicing law. This provided that if you were ill and away from your work for more than eight days, you would receive a certain level of compensation. I had two policies with two different carriers for this purpose, and this helped me sustain myself in this period of being off work. As my convalescence period proceeded, the insurance companies--as is often the case--became a bit anxious, shall I say, and concerned, lest I be--

Huth: [laughing] Malingering?

Adelson: Malingering. So without my knowing it, one of them sent a representative to call on me. He came one afternoon, rang the bell, and I answered the door. He identified himself, and I invited him in, and he started to interview me.

After ten minutes or so the doorbell rang again, and there was a representative of the other company--this was, I think, a pure coincidence. And he came in, and I introduced those two gentlemen to each other, and they interviewed me. So we had this three-way conversation, and they were asking all sorts of things. It was obvious to me why they were there--I'd been practicing law now for twenty years, and I'd had a lot of dealings with insurance companies.

After we were into this thing for about thirty minutes with both of these gentlemen, the doorbell rang again, and in came the RN from Kaiser, replete with her white uniform and nurse's cap, her satchel of equipment, and other things in which she carried supplies, and she said, "I've come to check you over again--I've come for the weekly check-up." Some such words as that.

So I introduced her to these two gentlemen, and I said, "If you don't mind, we'll interrupt our interview while the nurse does what she has to do, and then we can resume it." But they began folding up their tablets [pads of paper] and putting them away in their briefcases, and they said, "We'll not interfere with the medical process. We'll be in touch with you later." [laughs] And they both left. I loved that.

Huth: What would have happened if she'd come the next day?

Adelson: Well, we wouldn't have had this nice little tete-a-tete, but at least it turned out very humorously, and I thought to myself, "Well, Kaiser provided the stitch in time."

Huth: It saved the day.

Adelson: I didn't have to argue with these people. And I didn't have any trouble with them at all. This was in December of 1971.

They waited about thirty days, and then both approached me again--this time by telephone and by letter--offering to make a settlement, but cancelling the policy. You see, this had no limit--it could go on the rest of your life if you were disabled. I declined, and assured them that I was going back to work as soon as they would let me go back.

But I often chuckled over that experience because Kaiser was the "stitch in time!"

Huth: [laughing] That's a tremendous story.

Hospitalization Experience with an Unusual Roommate, 1982

Adelson: The third experience I had of being hospitalized at Kaiser was in August of 1982. I was beginning to develop what has since been diagnosed as osteoarthritis of the right ankle. I was being given medication to ease this, although they weren't sure at that point what it was.

Huth: Was it only to ease the pain?

Adelson: Yes, to ease the pain.

Huth: And make it work better?

Adelson: Make it work better, more relaxed and so on. I would try one thing, and it didn't seem to help, so another type of medication was suggested. The thing that "felled" me, as it were, was a medicine that had the appropriate name of Feldene. I'd say that now my chart at Kaiser has on the outside cover in big letters: "This patient is not to be given Feldene!" It produced some internal bleeding, and I noticed it in the stool, and called--my doctor was out of town.

Well, I might digress to say that Dr. Bolomey had retired at the end of December, 1979. I went to a doctor whom I've seen ever since then, who was the younger of the two men that had been recommended to me by Dr. Sender, namely Dr. Arthur Klatsky. And he was out of town, so I called the short-term appointment nurse at Kaiser. This was about August 1982.

Adelson: I told her what my observation was, and she said, "You must be seen immediately." She arranged for me to be seen just a couple of hours later, and I went down to Oakland--all this took place in Oakland--to this doctor whom I was assigned to in this emergency. He was in what they used to call "drop-in,"--part of a drop-in set-up. but you had to arrange it through the telephone--you couldn't just drop in there.

When he took a look at the history of the situation, he said, "We're going to admit you immediately." I said, "Well, let me go out and move my car. It's in a place where it shouldn't remain very long." He said, "You will not go out and move your car. Somebody can move it for you later." He said, "You're going right now to the emergency room, and you're not even going to walk." And he got a wheelchair, although I didn't feel anything--I just felt fine.

So I was in Kaiser, and then the emergency people said I must be admitted. I was admitted, and given tests, and they found out first of all that the bleeding had stopped. and that it had been from a small gastric ulcer that had formed as a result of this Feldene medication. So I was there for several days--had a very good experience.

The only problem was that I had a roommate, an elderly gentleman, who was what nurses call a "sundowner." The term comes from the fact that this man was old, and I don't know just what had led to this, but he had a considerable amount of senility, and at sundown these people become very vocal, and they start yelling and making noise.

Huth: He really needed a room to himself.

Adelson: Yes. He would try to get out of bed and he wasn't able to. And the nurses kept coming in to restrain him, and he kept arguing with them, but most of the time he was just berating his wife. So the next morning I said to the nurse that came on duty, "This is a bit much." And she said, "I'm going to move you immediately."

I think that's another good example of what happened. I felt that during the night this fellow might knock himself off at any time, or get quiet or some such thing.

Huth: That went on all night?

Adelson: He was nonstop. The only thing that stopped him was sunrise.

Huth: I've never heard of a sundowner.

Adelson: That's what they call them. I have since been told that this behavior is true of people who are much younger and have other problems--alcoholism, especially if they have delirium tremens. At night they just come to life.

So that was my third and last--or most recent--experience.

Huth: How about your wife? Has she had any similar experiences at Kaiser? Or is she just very, very healthy?

Adelson: Well, she's never been hospitalized at Kaiser, but we have had to go down there in emergency situations, and she's been treated in the emergency room very satisfactorily. You just go down and present yourself, tell them what's wrong with you, and they take care of you.

Huth: Thank you. Those were very interesting personal experiences.

Recalling Several Special Physicians, and the Controversy Over
Affiliation with Kaiser Permanente

Huth: Will you please tell me about your encounters with special doctors at Kaiser? You said that at one time you met Dr. Cecil Cutting.* I think it was in connection with your union discussions in the beginning of your first interview. Did you have enough of an encounter to describe him?

Adelson: I believe Avram Yedidia arranged that. He arranged for us to be able to talk to some of the senior people at Kaiser--Dr. Cutting was one of them. All I remember is that he was a very comforting, quietly confident person, just the kind of person you'd want to have a connection with. We also had an interview with a Dr. Brother--I don't remember his first name--who was also really a masterful person.

Huth: And was that in connection with the union, too?

Adelson: Yes, with this group we wanted to be able to reassure ourselves about the caliber and the quality of the people.

Huth: And so you were interviewing these doctors?

*Cutting interview, Regional Oral History Office.

Adelson: Yes. We would go back and talk to all the people we knew in the health plan group, or who were interested in the health plan group, and tell them of our interview and our experience, and our feelings about it.

After all, I have always felt--still do to a great extent--that humans are so different in their makeup, that in spite of all the technical advantages medicine is still somewhat of an art--not completely a science. The art of handling people and their problems is a very important ingredient, I think, in health care delivery.

Huth: Were you aware of any controversy in the medical world over the doctors who joined Kaiser Permanente?

Adelson: I heard that in the initial years some doctors were denied board certification in their specialties because of being in a Kaiser type of operation. In fact, I mentioned that in the early days of our membership at Kaiser we heard that the county medical society discriminated against Kaiser doctors, and the CMA (California Medical Association) discriminated against them--again, this is hearsay. But I've heard it so many times that there may well be a modicum of truth to it. I've heard that in the very earliest days they didn't want to admit them to membership. Presumably they were regarded as renegades or whatever.

Huth: That opinion was pretty widespread?

Adelson: Yes.

Huth: Did the individual Kaiser members and patients know about that?

Adelson: Yes. See, this brought out the importance of having talked in advance with Dr. Cutting and Dr. Brother, because this kind of thing, the question of discrimination against people, is an old, old phenomenon in the world, and most adults, regardless of how much or how little education they have, know this. So this never became a problem with respect to the people joining Kaiser.

Huth: But it may have been a problem for the doctors who professionally wanted this--the board certification and membership in the medical society.

Adelson: Of course, and it also angered people like me. I just don't feel that there is a place for that sort of thing.

Huth: Do you think the animosity probably was because they were doing something different? It was a whole new concept.

Adelson: Of course, they were pioneers. And I think the earliest of the Kaiser doctors were more than just pioneers, they were--as I remember them--very idealistic about what they were doing.

Huth: Have you ever talked to Avram Yedidia about his philosophy, and as a friend of his, have you ever had conversations about this?*

Adelson: Well, we have talked about the Kaiser situation, the Kaiser plan, the Kaiser system, many, many times over the years. Of course, he looks at it from a different perspective. He's not an MD [medical doctor], but he's still a professional in connection with the general notion of health care delivery.

Huth: And he's really an expert in the whole concept, too, isn't he, because of his background?

Adelson: Yes, there's no question about it.

Huth: And he believes deeply in the concept.

Do you have anything to tell me about Dr. Arthur Roth?

Adelson: He was a pediatrician who took care of young people. He took care of pre-teens, and we had a great deal of contact with him just through our daughters. We thought he was an excellent doctor. He left Kaiser, and I think he's still in the area.

Huth: Do you know why he left?

Adelson: Well, I think he became interested in other activities--again, this is hearsay--

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Huth: But did he continue to practice medicine?

Adelson: He continued to practice medicine, and if my information is correct he has gone into a more conventional type of medical setting.

Then we had a very good experience--both my wife and I used him as our family doctor--with a Dr. Donald Ash. He was an internist, and was at Kaiser for a great many years. He was very good at working with people. And he left Kaiser and became a psychiatrist.

Huth: Did he go back to school, then?

Adelson: Right. he went into a residency and became a psychiatrist, and as far as I know--I haven't checked the telephone directory in the last few years. but when I last did check he was practicing psychiatry in Oakland.

Huth: One other doctor was Dr. Lester Hollander.

Adelson: Well, I just knew him professionally. He was, I believe, a chief of medicine. In other words, he was the head of all the people who were in the department of internal medicine. He had an excellent reputation. I think he's still at Kaiser. He may be semi-retired now.

Huth: But this isn't a doctor that you know?

Adelson: No, I never used him personally, but I had contact with him. I talked with him in the early years. Again, one came away with the feeling that he was devoted to his work; he believed in the Kaiser system, and he was a very good doctor.

The Teamwork Concept

Huth: One of the questions that we're asking the doctors is what it was like to be part of a team. They have talked about the teamwork. Do you get any feeling of that as a user? That these are all people that work well together as a team?

Adelson: As a user I have always felt that there is teamwork, and there is cooperation and support for each other. I am sufficiently sophisticated to feel that in their own circles, in their own teams, there may be some tugging and hauling from time to time because of differences of personality. and because of crises that are always arising.

My impression is, in general, that in the practice of medicine there is always a crisis. Not just on the horizon, but right in the front row. and I think the Kaiser system is able to handle that quite well. Life is as hard on the individual [Kaiser] doctors as it is on the fee-for-service people. I have a younger brother who is a fee-for-service physician in northern Illinois, and he has always said to me, "There is always a crisis at hand."

Support for the Program from Outside Physicians and Health Plan Members

Huth: Did your younger brother who's a doctor ever say anything about Kaiser that would make you think that he was critical of the concept, or did he ever seem to be critical?

Adelson: No, quite the contrary. In recent years he has told me that he feels that HMOs [health maintenance organizations] and the type of group practice that they have are the thing of the present and certainly of the future. When I had my heart surgery he came to visit me at Stanford, and we had a meeting in the hospital at Stanford. How it happened—I won't go into in detail—but he had a meeting with Dr. Bolomey in Oakland, and came away feeling very pleased with what he heard and what he saw.

In addition, when I told him in June, 1971, that Kaiser had diagnosed my case as being one of aortic insufficiency, and that I would have to have open heart surgery to correct it, and they recommended it, he said, "Well, don't you think you ought to get a second opinion?"--which I think is the typical approach of fee-for-service doctors, and a correct one. I said, "Well, Kaiser is one jump ahead of you. They're sending me to Stanford for a second opinion." He said, "Well, you couldn't go to a better place." So I think he has no hostility whatsoever toward it.

My father-in-law, who died in 1970, knew all about our membership and involvement with Kaiser, and he was a family practitioner of the old school. He practiced medicine for fifty-one years--oh, more than fifty-one years. He was eighty-four years old when he died, and he'd only been retired a few years. But in any case, he never had any disapproval or hostility whatsoever toward Kaiser. In fact, in his last years as a practitioner he related to me that he thought that if he had been a Kaiser doctor, life would have been a little easier for him.

My wife has a step-sister who is a psychiatrist in New York City. She has no hostility toward the Kaiser system in any form or fashion. And she's completely aware of it because she went to medical school at UCLA, and did some of her post-medical school training at the veteran's hospital in Los Angeles, and, of course, Kaiser was very well-established in Los Angeles during that period.

As a matter of fact, in the early years I used to know doctors who were fee-for-service doctors, and who were, let me say, "unfriendly" toward Kaiser. But in recent years I have not run into anyone. I think Kaiser is very universally accepted in the medical field and respected--as far as I can see, as a lay person and as a user.

Huth: They've proven themselves over the years, apparently.

Now, you told me some very nice stories about yourself. Are there any friends of yours who had any particular experiences that are worth relating?

Adelson: No, I don't know of any that are worth relating. I have many friends that have had experiences of one sort or another, namely, who've had to use the system for health problems. Some of them had surgery, and they have all stayed with it and spoken favorably about it.

Huth: Have you known of any that have left for any reason? Whether or not you agreed with their reasoning?

Adelson: No. Well, names don't come to mind. I've known of one or two cases where both spouses worked, and both had coverage for themselves and dependents. One spouse would be covered by Blue Cross or Blue Shield, and the other was a Kaiser member, and I've known occasions where the spouse that was the Kaiser member would be induced to drop out and be covered as a dependent under the other plan. I know of a number of cases of that sort--people who dropped out, either for that reason, or because they got peeved over some really insignificant experiences. and who've regretted dropping out.

I might add, parenthetically, I don't know of anyone who's been kicked out of Kaiser.

Huth: Oh. do you mean who's a member, and who got kicked out?

Adelson: Yes. There are people who are hypochondriacs, or people who are just difficult people--they're nice people, but they're difficult people. They are people who will strain your patience. I've never known of a case of such types of people being dismissed, or kicked out, or whatever the proper term is.

More on the Kabat Kaiser Institute, Vallejo

Huth: This would probably be a good time to hear about the Kabat Kaiser Institute in Vallejo, what you know about it, and your personal experiences with it.

Adelson: Well, as I said earlier, we were personally acquainted with Dr. Milton Levine, who was connected with the Kabat Kaiser Institute in Vallejo, and we were personally acquainted with his wife. We met them because one of their children and one of our children

Adelson: were in the same nursery school at that time. So we heard about the institute through Dr. Levine, who was an M.D., but who was working there as a researcher.

I don't recall the nature of the work he was doing. I don't believe he was actually treating patients as such, but in any case we had a direct experience with Kabat Kaiser in 1953, with my wife's mother whom we had covered as a member of the Kaiser health plan. She suffered a stroke, and Kaiser sent her to Vallejo for rehabilitation. [doorbell rings]

[tape off]

Adelson: So we had occasion to visit my mother-in-law with great frequency while she was at Vallejo, and to observe the other patients that we would come in contact with in what they called the dayroom, and in the other areas that were in common use by patients and visitors. And we learned about a great many of these people--many of whom were in wheelchairs and had been injured mine workers working in mines east of the Mississippi for the most part, but who were represented by the United Mine Workers' Union, which was then headed by John L. Lewis.

That union had made an arrangement with Kaiser and the Institute to send these badly injured people to Vallejo for rehabilitation work. We also observed that many of their families were there, and that Kaiser of Vallejo had a living arrangement for them. I don't know the details of it, but there were apartments for them to live in, and, as I recall, they were either on the same grounds. or adjacent to the hospital--very close to the hospital.

This was really a very laudable project. We noticed other people who were there for rehabilitation work who were neither miners nor stroke victims: paraplegics, and people who had had serious injuries resulting from various types of accidents. It was a very interesting thing to observe that this type of work was going on. Even though this was as recent as 1953, it was still somewhat of a pioneering operation. It had been going on for some time prior to this, and we were able to look at it in 1953 for the first time.

Huth: Did you ever meet Dr. Herman Kabat?

Adelson: Well, we met Dr. Kabat primarily because we knew Dr. Levine. We saw him at Vallejo. and he also lived not very far from our home. We also met his wife and his children. They lived on Arlington Avenue in El Cerrito at the time.

Huth: Do you know anything about where he is now?

Adelson: Well, he left the area several years later, and I'm told he was involved in a similar type of operation in the state of Connecticut, but I've had no contact with him at all, and what little information I've had I recall getting from Dr. Levine, who maintained some degree of contact through the years.

Huth: Where is Dr. Levine now?

Adelson: He lives in Los Angeles. And he is owner, or co-owner, of a medical testing laboratory in Los Angeles, and has been in that type of work for a great many years. He moved to Los Angeles in the middle 1950s and has remained there.

Huth: Anything else you want to tell me about the Kabat Kaiser Institute?

Adelson: No, I think I've pretty well covered that.

Reflections on the Medical Program, Law Practice, and Other
Interests

Huth: Is there any comment that you want to make as an overview, that covers your philosophy about this program?

Adelson: Well, I think the Kaiser system, their whole philosophy, is a sound one, and it has withstood the test of time, and all the stresses that have been experienced by hospitals, and the medical profession in general. I think it's here to stay. I think this is the system of the future as well as of the present.

Huth: You don't have any grandchildren?

Adelson: No.

Huth: Your daughter is not married. And if you had grandchildren, would you like to have them have the kind of care that they would have in such a system?

Adelson: Oh, yes. There's no question about it.

Huth: Could you tell me what you're doing now? We covered you through going into the law practice.

Adelson: I am still engaged in the full-time practice of law. My time is devoted almost exclusively to work in the probate court--work with wills, estates, estate planning, conservatorships, guardianships, and legal problems that arise in connection with those types of activities.

Huth: Do you work an eight-hour day?

Adelson: Well, I'm in my office four full days a week, and I take one day off in mid-week, namely Wednesday. I have stopped doing most litigation work. As such, I am in a more sedate type of practice, which is what one normally has in the probate court. Even though I'm in my office only four days a week, my mind is not turned off at other times, and I do some preparation work. But not at home in the evenings. Just depending on the volume of the work and the scheduling that takes place.

Huth: Do you still have some of those old original clients coming to you on legal matters?

Adelson: Yes. some of them have moved away; some of them have expired.

Huth: That's thirty-six years now?

Adelson: Yes, that's right. I am in the second and third generation with some clients, in other words, doing work for their children or their grandchildren.

Huth: What about trips. and travel, and that kind of thing? Have you done that?

Adelson: Well, I haven't done much in the last couple of years because of this arthritic ankle, but prior to that we would get away for vacations and trips.

Huth: Where did you go?

Adelson: We have been to Europe a great number of times. We've gone to Mexico; we've gone to Canada; we've gone down to the Panama Canal. Curiously enough, we've never been to Hawaii.

Huth: Maybe you'll go someday. [laughs]

Adelson: It's the logical place. But I think because of the fact that I was raised in Florida which is sort of a resort and a semi-tropical area, Hawaii has never been the drawing card that it might otherwise have been.

Huth: Are there any other activities that you like to spend time on?

Adelson: Well, I'm interested in gardening, although this arthritis in the ankle has somewhat curtailed that, and I do as much walking as I can. Until this ankle became a problem two years ago, I used to walk every morning about a mile and a half, and during the middle of the day I'd walk another mile, or mile and a half. I had to cut that down. I am not a golf player. I'm not a stamp collector. I really don't have any hobbies as such. I don't do any shop work with power tools or equipment.

Huth: Do you look forward to retirement ever?

Adelson: No, I hope to be able to keep my finger in the practice of law indefinitely.

Huth: And that's something that you can do with law, isn't it?

Adelson: It is possible.

Huth: How about your wife? Does she have any special activities?

Adelson: She's interested, as I am, in the current scene, and we try to keep up with everything. We go to musical events, go to plays, and we go to the opera. She manages to audit at least one course at any one time, either at the University of California, or at the Graduate Theological Union (GTU), which is just north of the campus.

As a result of a five-week trip to Israel, which we made on our own in 1977, she has become quite interested in the old background of that entire region. She began auditing courses in the Department of Near Eastern Studies at the University of California, Berkeley, which covers all the countries of what we call the Middle East--they call it the Near East. Many of these courses deal with Judaic studies. She's very much immersed in that. Many of them are given at the GTU, which awards master's degrees, and Ph.D. [doctor of philosophy] degrees in those fields, and which has students in various branches of religion and theology.

In connection with this auditing work there's a great deal of outside reading. She manages it, and she likes it.

Huth: Is she working for a degree?

Adelson: No, she is not. She is doing it for her own pleasure and edification--without the pressure of having to write a term paper or take a final examination--which is I think a very good way to operate.

Huth: That's very interesting. Are there any last minute comments you'd like to make?

Adelson: Well, just this: that I have enjoyed working with you, and with this particular program. And to whatever extent--however small -- that I am contributing something to the knowledge of the Kaiser health plan system as a user of the system--I will feel grateful.

Adelson: I believe in it, and I hope it will advance and prosper, and I think it's doing a good job. I think it's really delivering excellent health care to people.

Huth: Thank you very much. This concludes our interview.

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